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CORPORATION OF GLASGOW

Health Department

SCHOOL HEALTH SERVICE

REPORT

ON THE

**Medical Inspection and Treatment  
of School Children**

FOR THE YEAR ENDED 31st JULY, 1969



*(Reprinted from the Report of the Medical Officer of Health  
for the year 1969).*





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## PREFACE

This report on the work of the School Health Service is for the year ended 31st July, 1969, and is the 60th annual report since school medical inspections were organised in Glasgow in 1909.

Medical staffing difficulties continued and while part-time staff helped to alleviate the problem, fewer children were examined medically.

The heights and weights of Glasgow Children, which appeared to have levelled out in the 1960's after a continual rise since the inception of routine medical inspection, were lower than the previous year's figures and, as usual, below the average for Scotland as a whole.

Cleanliness Inspection by nurses continued to be pursued unremittingly, an increase in the numbers seen being recorded.

Health Education continued successfully during the session, covering children of all ages and students at further education colleges.

Hearing Investigation was also prominent, the work of the Audiometric Survey Unit continuing to expand, and a pilot scheme of screening five-year-old children was successfully carried out.

The secondment of hospital Consultants continued to be a great help to the service.

The results of Routine Dental Inspections showed that the number requiring treatment was still extremely high.

A. R. MILLER,

*Medical Officer of Health.*

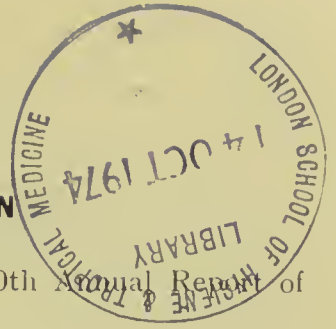
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## GENERAL INTRODUCTION



I have much pleasure in presenting the 60th Annual Report of the School Health Service.

Staffing has now become a major problem with a big turnover in most groups, nursing, speech therapy, ancillary medical staff as well as in medical officers. In the latter group, a large amount of the work is being carried out by young married women doctors who are prepared to give one or two weekly sessions, usually only in the forenoons. Without them the basic work could not continue. Few medical men now present themselves for whole-time work in the field.

This means of staffing does not provide for that continuity of service which enables adequate advisory and supportive help to be given to teachers and parents.

While an annual time-table is prepared for every educational establishment and clinic, the staffing situation accounts for a high percentage of administrative time as gaps have to be filled at short notice, necessitating personnel moving wide distances throughout the City.

The Scottish Home and Health Department made an analysis of the 1968 figures (the first year of the computerised card) and commented on the range of defect reported by authorities. In this review, Glasgow has much lower figures than other areas for Colour Blindness, Impaired Hearing, Undescended Testes and to a lesser degree for Verruca, Enuresis, Asthma and Minor Orthopaedic conditions. On the other hand, Pediculosis and Dental Caries were each much above the national average.

The prescribed tables appended show the pattern of work. In general, fewer children have been examined medically as staff have had to be directed towards other special examinations and aspects of work. Except for the heights of Entrant boys, heights and weights are lower than last year's figures and, as is usual, below the average for Scotland as a whole. Table 7 shows the heights and weights of Glasgow school children over the whole period of 60 years of routine medical inspection. This shows a continual rise until the 1960's when there is a levelling out.

Pediculosis still defeats all the methods employed to eradicate it. The numbers examined and treated this year have increased as a result of transference of nurses previously employed by the Divisions.

The secondment of hospital Consultants to attend at our clinics is of great help to the Service and it is gratifying to record the increasingly helpful working arrangements with the Paediatric Units, which operate on a mutual help basis to the benefit of the school child, whether it be the problem of Enuresis, a request for the School Meals Service to supply special diets for Coeliac and other conditions, or for interchange of information on children who may require special education.

The Health Education scheme which dates from 1960 continued during the year as an integral part of the work of the Service. Dr. Alison E. Mack, in an article on page 101 of this report, discusses the increasing need for health teaching. No full-time staff were wholly employed on health education but seven full-time school medical officers were partly employed and devoted 156 sessions to this work during the year. Of the part-time school medical officers, six were wholly employed and two partly employed on health education giving 524 and 121 sessions respectively. Health visitors to the number of 34 (including those in their contract year) gave part of their time to health teaching, devoting 551 sessions altogether to this work during the year. At the present time health teaching is provided in: 48 secondary and 31 primary schools, 10 schools for the handicapped, 1 approved school and 10 colleges of further education.

It is a pleasure to record my thanks to all of the specialists, to the staff of the Service and to the Director of Education and all his staff who are our colleagues in the service we supply.

My thanks are due to the Convener and Members of the Education Committee for their interest and stimulating encouragement. Without the assistance and painstaking work of Mr. James Stewart, Assistant Administrative Officer, much of the value of our work would be lost. His long experience of the work of the Department is invaluable. I am grateful to him for the support and advice which he gives, as well as his help in preparing the material for this report.

MAUD P. MENZIES, M.B., CH.B., D.P.H., D.P.A.,

*Principal Medical Officer.*



## LIST OF STAFF AT 31st JULY, 1969

### (a) Whole-Time Staff—

Principal Medical Officer ; 2 Assistant Principal Medical Officers <sup>(1)</sup> ; 17 School Medical Officers <sup>(2)</sup> ; 1 Chief Dental Officer and 21 School Dental Officers <sup>(3)</sup> ; 1 Superintendent School Health Visitor, 45 Health Visitors and 44 Nurses <sup>(4)</sup> ; 5 Speech Therapists <sup>(5)</sup> ; 1 Occupational Therapist <sup>(6)</sup> ; 1 Superintendent Physiotherapist and 9 Physiotherapists (including 4 Physical Education Teachers seconded to Orthopaedic Clinics) <sup>(7)</sup> ; 4 Audiology Technicians, <sup>(8)</sup> 5 Dental Technicians and 4 Dental Auxiliaries <sup>(9)</sup> ; 23 Dental Surgery Assistants <sup>(10)</sup> ; 1 Dispensing Optician (seconded by Western Regional Hospital Board) ; and 1 Assistant Administrative Officer and 27 Office Staff <sup>(11)</sup>.

<sup>(1)</sup> *Dr. John D. Leonard died 30.11.68 and Dr. Andrew D. Chisholm was promoted Assistant Principal Medical Officer 1.1.69.*

<sup>(2)</sup> *Drs. Helen M. Scott, Jean McEwen and Colin Brown left respectively 31.8.68, 28.9.68 and 21.6.69. Dr. Margaret McKay retired 13.1.69. Drs. Isobel D. Stewart, Helen W. Thomson, Hugh Sutherland and A. T. Campbell were appointed respectively 2.9.68, 16.9.68, 30.6.69 and 22.7.69.*

<sup>(3)</sup> *Messrs. Peter McMenemy, Alex. Robertson, Anthony Lewis, Donald Alexander, Andrew Gummers and Misses Alison Wilson and Mary McKenzie were appointed respectively 30.9.68, 29.10.68, 11.11.68, 6.1.69, 17.3.69, 26.8.68 and 17.3.69. Miss Nancy Ure, Mr. Alistair Christie, Miss Joyce Aitken left respectively 24.8.68, 7.9.68 and 22.3.69. Mrs. Mary Macdonald and Miss Elixabeth Webster retired respectively 28.10.68 and 8.5.69.*

<sup>(4)</sup> *Miss Jean Ferguson, Superintendent Health Visitor, retired 12.3.69 and Miss Elizabeth Cowan was promoted Superintendent 13.3.69. In September 1968, 11 Nurses were transferred from the Divisions for cleanliness inspection duties in the School Health Service. During the year 7 Health Visitors were appointed and 8 left. An additional 9 P.H. Nurses were appointed and 10 left.*

<sup>(5)</sup> *4 Speech Therapists left and 3 were appointed.*

<sup>(6)</sup> *2 Occupational Therapists left and 2 were appointed.*

<sup>(7)</sup> *2 Physiotherapists left and 1 was appointed.*

<sup>(8)</sup> *1 Audiology Technician left and 1 was appointed.*

<sup>(9)</sup> *1 Dental Auxiliary left.*

<sup>(10)</sup> *9 Dental Surgery Assistants left and 7 were appointed.*

<sup>(11)</sup> *9 Office Staff left and 9 were appointed.*

### (b) Part-Time Staff—

(i) Paid by Glasgow Corporation 28 School Medical Officers (whole-time equivalent, 5) ; 4 Dental Officers (whole-time equivalent, 2) ; 1 Anaesthetist ; 1 Orthodontist ; 4 Speech Therapists (whole-time equivalent, 2) ; 1 Dental Surgery Assistant (half whole-time equivalent, 1).

- (ii) Seconded by arrangement with Western Regional Hospital Board 21 Consultants (9 Oculists, 6 Aurists, 1 Cardiologist, 1 Dermatologist, 1 Neurologist, 1 Orthopaedic Surgeon and 2 Anaesthetists).

Local doctors and dentists undertook emergency duties at the residential schools and at Mossbank and Balrossie Approved Schools in accordance with separate arrangements made with the local Executive Councils.

## GENERAL STATISTICS

Area of City in Acres	...	...	...	...	39,725
Population of the Area	...	...	...	...	927,948
School Population	...	...	...	...	174,392
Density of Population per acre	...	...	...	...	24
Number of Schools—					
(a) Primary	...	...	...	...	214
(b) Secondary	...	...	...	...	64
(c) Schools for Handicapped Children	...	...	...	...	26
(d) Occupational Centres	...	...	...	...	11
(e) Approved Schools	...	...	...	...	2
(f) Residential Schools	...	...	...	...	12
(g) Nursery Schools	...	...	...	...	52
(h) Hospital Schools	...	...	...	...	9
(i) Agricultural Schools	...	...	...	...	1
(j) Gardening Schools	...	...	...	...	1
Total Schools under Education Authority					392
(k) Schools in receipt of grant and under Medical Inspection	...	...	...	...	10
					402

## SANITARY CONDITION OF SCHOOLS

During the session, 156 visits were paid to 151 schools for the purpose of general inspection. In the same period, 65 visits were paid to 64 kitchens and dining halls where meals for school children were prepared and served.

## ORGANISATION AND ADMINISTRATION

### SYSTEM AND EXTENT OF MEDICAL INSPECTION AND TREATMENT

#### INSPECTION

Routine Medical Inspection in ordinary schools was given to Entrants—Infants—and those born in 1955 and 1952; doctor/health visitor team tested for vision only, those born in 1959. In addition, Routine Medical Inspection was carried out in schools and classes for handicapped children.

Other arrangements were broadly similar to those in the previous year

## FACILITIES FOR TREATMENT

A list of the school clinics and services given were as follows:—

CLINIC	Skin, Eye, Ear and other minor diseases	Refraction	Dental	Special Skin	Ultra-violet ray	Orthopaedic	Scabies Baths
80/90 Kinfauns Drive, W.5	1	1	2	—	—	1	—
18 Plean Street, W.4	1	—	1	—	—	—	—
4 Sandy Road, W.1	1	1	1	—	—	—	—
130 William Street, C.3	1	—	1	1	—	—	—
91 Denmark Street, N.2	1	1	2	—	—	—	—
Hyde Park School, N.1	1	1	1	—	—	—	—
15 Glenbarr Street, N.1.	1	1	4	—	1	1	1
60 Avenuepark Street N.W.	1	1	1	—	—	1	—
40 Grovepark Street, N.W.	1	1	1	—	—	—	—
2 Lochdochart Road, E.4	1	—	—	—	—	—	—
5 Craiglockhart Street, E.3	1	—	—	—	—	—	—
74 Wellhouse Crescent, E.3	1	1	1	—	—	—	—
155 Crail Street, E.1	1	1	2	—	—	—	—
23 Acorn Street, S.E.	1	1	2	—	—	—	—
10 Redan Street, S.E.	—	—	1	—	—	—	—
22 Arnprior Quadrant, S.5	1	1	—	—	—	—	—
Ashtree Road, S.3	1	1	1	—	—	1	—
Calder Street School, S.2	—	—	1	—	—	—	—
26 Florence Street, C.5	1	1	2	—	1	1	1
Netherplace Road, S.W.3	1	1	2	—	—	—	—
74 Berryknowes Road, S.W.2	1	—	—	—	—	—	—
Fairfield School, S.W.1	—	—	1	—	—	—	—
St. Anthony's School, S.W.1	1	—	—	—	—	—	—
29 Govan Road, S.W.1	1	1	1	—	—	—	—

Two mobile dental units were functioning during the Session—  
No. 1 Unit at Castlemilk and No. 2 at Easterhouse.

Other treatment facilities provided were as before.

## CO-ORDINATION WITH OTHER DEPARTMENTS OF THE AUTHORITY

During six weeks in July and August, 1969, arrangements were again made for children suffering from otorrhoea, epilepsy, enuresis, ped. cap. and other conditions to spend a holiday in Seafield Residential School, Ardrossan. The numbers accommodated were: from 7th to 18th July, 34 boys and 28 girls; from 22nd July to 1st August, 27 boys and 37 girls; from 4th August to 15th August, 23 boys and 26 girls; total 175.

## MEDICAL EXAMINATION OF SCHOOL MEALS STAFF

	Numbers Summoned	Numbers Attended	Numbers Found Fit	Numbers Found Unfit	Number Deferred
<i>New Cases—</i>					
Full-time	1,039	758	678	55	25
Part-time	363	281	259	19	3
<i>Old cases—</i>					
Routine Examinations	418	349	347	2	—
	<u>1,820</u>	<u>1,388</u>	<u>1,284</u>	<u>76</u>	<u>28</u>

## CO-OPERATION WITH OTHER OUTSIDE AGENCIES

By arrangement with Professor Hutchison of the Royal Hospital for Sick Children, 41 D.C.H. students visited several nursery schools and school clinics.

School clinics referred to hospital 333 cases (278 boys and 115 girls), the ailments from which they suffered being as follows :—

Skin—	Boys	Girls
Wounds, etc. (minor injuries) ... ..	91	32
Fractures ... ..	28	18
Other skin conditions ... ..	56	48
General ... ..	17	9
Eye ... ..	22	5
Ear, Nose and Throat ... ..	4	3
	<hr/>	<hr/>
	218	115
	<hr/>	<hr/>

Glasgow Convalescent Home, Lenzie, continued to admit children during the year ending 31st July, 1969. One hundred and sixty-five children were summoned to school clinics for preliminary medical examination and, of the 122 who attended, 117 were considered suitable for admission to the Home.

During June, July and August, 18 children were summoned to school clinics for preliminary medical examination prior to going on holidays organised by the W.R.V.S. Sixteen children attended, 15 of these being considered "fit" and 1 "unfit."

## MEDICAL TREATMENT

## (A) MINOR AILMENTS

Throughout the treatment tables, "Single Visit Cases" includes those treated and disposed of at first visit, cases not for treatment, and cases without apparent disease.

## (1) CUTS, BRUISES, SPRAINS, MINOR INJURIES, ETC. :

<i>Details of new cases—</i>	Boys	Girls	Total
Cuts, bruises, sprains, etc. ...	2,464	1,699	4,163
Burns and scalds ... ..	201	137	338
	<u>2,665</u>	<u>1,836</u>	<u>4,501</u>

The attendances are included with those for skin conditions (page 89).

## (2a) DISEASES OF THE EAR

EXAMINED ONLY—	Boys	Girls	Total
Recommended operation for tonsils and/or adenoids ...	96	74	170
Other operations recommended	22	10	32
Referred to hospital ... ..	12	12	24
Single visit cases ... ..	241	207	448
Totals ... ..	<u>371</u>	<u>303</u>	<u>674</u>
TREATMENT AT CLINICS—			
<i>Details of new cases—</i>	Boys	Girls	Total
Chronic suppurative inflammation (Otorrhoea)—Single ...	74	67	141
Double ...	4	8	12
Results of above diseases ...	23	12	35
Retracted membrane ... ..	9	9	18
Chronic aural catarrh ...	18	14	32
Ceruminous collection (wax)	61	58	119
Nasal catarrh ... ..	28	11	39
Laryngitis ... ..	5	6	11
Polypus ... ..	2	1	3
Other diseases ... ..	92	80	172
	<u>316</u>	<u>266</u>	<u>582</u>
Cases from previous session ...	370	280	650
Totals ... ..	<u>686</u>	<u>546</u>	<u>1,232</u>
Clinic attendances of above cases ... ..	<u>6,046</u>	<u>5,068</u>	<u>11,114</u>

## EXAMINATIONS BY SPECIALISTS

Cases to the number of 1,727 (1,007 boys and 720 girls) were summoned to school clinics for examination by aurists. Of that total 475 (293 boys and 182 girls) failed to attend, the remainder being dealt with as under :—

<i>At school clinics—</i>	Boys	Girls	Total
Recommended operation for tonsils and/or adenoids ...	95	82	177
Other operations recommended	25	4	29
Referred to hospital ... ..	69	51	120
For X-ray ... ..	48	47	95
For Audiogram ... ..	68	62	130
For Hearing Aid ... ..	2	2	4
Other recommendations and treatments ... ..	407	290	697
	<u>714</u>	<u>538</u>	<u>1,252</u>

## AUDIOMETRIC EAR CASES

Cases attending ear clinics were referred for audiograms and for examination by the specialist or medical officers attached to ear clinics, with the following results :—

Summoned 140 (83 boys and 57 girls) ; attended 90 (52 boys and 38 girls) ; Recommendations included audiograms 44 ; front seat 11 ; lip-reading 8 ; hearing-aid 6 ; tonsil/adenoids operation 8.

## X-RAY EXAMINATIONS

Cases which included some children from the audiometric surveys, were X-rayed in Stobhill Hospital and at Florence Street Chest Clinic, on the recommendation of the specialists, with the results as shown. A few were X-rayed for more than one condition.

	Positive		Negative		Totals		Totals
	Boys	Girls	Boys	Girls	Boys	Girls	
Sinus ... ..	17	14	5	4	22	18	40
Mastoids ... ..	6	4	4	1	10	5	15
Mastoids and sinuses ...	2	5	2	2	4	7	11
Sinus and chest ... ..	3	—	—	—	3	—	3
Others ... ..	2	—	1	—	3	—	3
Total examinations ...	<u>30</u>	<u>23</u>	<u>12</u>	<u>7</u>	<u>42</u>	<u>30</u>	<u>72</u>

## 2b) DEFECTIVE HEARING

During the year ended 31st July, 1969, the work done in connection with cases of defective hearing was as follows :—

*Classification*—Pupils to the number of 660 (380 boys and 280 girls) were summoned with a view to grading as regards special education and, of that total, 406 (238 boys and 168 girls) attended, 7 being graded for deaf classes and 16 for partly deaf classes. The specialist also made the following recommendations :—

Audiogram, 32 ; hearing aid, 33 ; clinic treatment, 7 ; front seat in class, 30 ; lip-reading, 34 ; tonsil/adenoid operations, 22 ; aphasia class, 5 ; speech therapy, 11 ; and other recommendations, 10.

*Hearing Aids*—47 children (25 boys and 22 girls) had hearing aids recommended and supplied. Proprietary aids were recommended by the specialist for 5 boys attending the school clinic.

*Audiograms*—1,246 (728 boys and 518 girls) were tested by audiogram at Florence Street Audiometric Clinic.

## (3) DISEASES OF THE EYE, EXCLUDING DEFECTIVE VISION

<i>Details of new cases—</i>	Boys	Girls	Total
Blepharitis ... ..	234	204	438
Hordeolum (Stye) ... ..	126	126	252
Conjunctivitis, catarrhal ... ..	79	72	151
Conjunctivitis, muco-purulent	7	4	11
Ophthalmia, strumous (includes Phlyctenular conjunctivitis and keratitis) ... ..	—	—	—
Keratitis (interstitial) ... ..	—	—	—
Corneal ulcers ... ..	—	—	—
Corneal opacities ... ..	—	—	—
Dacryocystitis ... ..	1	—	1
Epiphora ... ..	—	—	—
Injuries ... ..	36	10	46
Other diseases ... ..	18	23	41
Single visit cases ... ..	194	204	398
	695	643	1,338
Cases from previous session ... ..	19	22	41
Total ... ..	714	665	1,379
Clinic attendances of above cases	3,236	3,025	6,261



## (4a) DISEASES OF SKIN, EXCLUDING RINGWORM AND FAVUS

<i>Details of new cases—</i>	Boys	Girls	Total
Scabies ... ..	701	646	1,347
Pediculosis capitis ... ..	24	49	73
Impetigo contagiosa ... ..	1,053	693	1,746
Ped. cap. and imp. cont. ... ..	65	72	137
Ecthyma ... ..	16	13	29
Dermatitis seborrhoica ... ..	39	56	95
Eczema ... ..	52	68	120
Alopecia areata ... ..	1	5	6
Psoriasis ... ..	6	8	14
Herpes zoster (shingles) ... ..	27	35	62
Lupus ... ..	5	1	6
Ulcers and abscesses ... ..	506	342	848
Urticaria ... ..	334	396	730
Warts ... ..	610	776	1,386
Other skin diseases ... ..	308	340	648
Single visit cases ... ..	2,111	1,917	4,028
	5,858	5,417	11,275
Cases from previous session ... ..	270	257	527
Totals ... ..	6,128	5,674	11,802
Clinic attendances of above and ringworm cases ... ..	60,777	56,456	117,233

*Special Cleansing Clinics—*

New Cases, 1,623; Attendances, 4,924.

(4b) SPECIAL SKIN CLINIC	Boys	Girls	Total
New cases ... ..	29	15	44
Attendances ... ..	131	214	345
(4c) BATH TREATMENT OF SCABIES	Boys	Girls	Total
Cases receiving baths ... ..	951	1,001	1,958
Baths given ... ..	3,377	3,241	6,618

## (B) DEFECTIVE VISION

## (a) CASES DEALT WITH AT REFRACTION CLINICS

	Boys	Girls	Total
Subjected to refraction—			
Spectacles prescribed ... ..	2,526	2,204	4,730*
Spectacles not prescribed—			
For further treatment ... ..	...	...	2,524
No treatment required ... ..	...	...	977
			8,231
Not subjected to refraction—			
For further treatment ... ..	...	...	194
No treatment required ... ..	...	...	170
Postponed ... ..	...	...	352
			716
Total number dealt with at refraction clinics ... ..			8,947
Number of clinics held ... ..			894
Average number of children per clinic ... ..			10
Average number subjected to refraction at each clinic			9.2

\* See page 90

At school clinics, five new occlusion cases were put on treatment while an additional 393 children were kept under observation. The number of children referred to hospital for further treatment was 225 and a further 887 were put off treatment.

At the end of the school session approximately 11,726 children were awaiting refraction, distributed as follows :—

New cases, 672 ; “ failed to attend,” 8,695 ; retests, 2,359.

\*Classification of refraction errors was as follows :—

Hypermetropia			Myopia		Anisopia	Total
H.	H.A.	M.	M.A.	M.xA.		
1,042	1,654	903	481	603	47	4,730

#### (b) PROVISION OF SPECTACLES

New cases were supplied with spectacles under the scheme to the total of 4,404. The nickel type was provided in 1,107 instances free of charge and the cellulose acetate in 3,297 on payment by each parent of a contribution towards the cost. In addition one child who was allergic to nickel was supplied free of charge with the cellulose acetate type.

Replacements and repairs totalled 1,182, the details being as follows :—new lenses, 216 ; replaced lenses, 318 ; frames, sides, etc., 648 (nickel 170, cellulose acetate 478). A contribution towards the cost of replacement or repair was made by the parent in 445 instances. The other 33 had minor repairs done to the cellulose acetate type without the necessity of asking the parent to pay anything.

#### (c) KEYSTONE VISION CASES DEALT WITH AT REFRACTION CLINICS

Included in the figures in (a) on previous page are 907 cases which emanated from the testing of children’s vision in schools by the Keystone apparatus. Of these, 867 were subjected to refraction, \*422 (208 boys and 214 girls) of these having glasses prescribed, whilst 269 were referred for further treatment and 176 were considered as not requiring treatment. The remainder, 40, were not subjected to refraction and were noted “ for further treatment ” (14), “ no treatment required ” (12) and “ postponed ” (14).

\*Classification of refraction errors was as follows :—

Hypermetropia			Myopia		Anisopia	Total
H.	H.A.	M.	M.A.	M.xA.		
114	173	65	22	47	1	422

At the end of the school year 1,013 children were awaiting refraction, all in the category “ failed to attend.”

The results of Keystone screening in schools are given on page 130.

## (d) CONSULTANT AT KELVIN SCHOOL

Dr. William Wilson, Consultant Ophthalmologist, attended Kelvin School during the year on 7 occasions and the treatment was as follows :—

<i>Subjected to refraction—</i>	Boys	Girls	Total
Spectacles prescribed ...	17	10	27*

\*Classification of refraction errors was as follows :—

Hypermetropia			Myopia		Anisopia	Total
H.	H.A.	M.	M.A.	M.xA.		
6	7	5	9	—	—	27

## (C) EAR, NOSE AND THROAT OPERATIVE TREATMENT

## (i) TONSILS/ADENOIDS OPERATIONS PERFORMED

The table below shows the number of operations for removal of tonsils and/or adenoids performed in the several hospitals during 1968-69.

	Boys	Girls	Total
Mearnskirk Hospital ... ..	243	236	479
Ear, Nose and Throat Hospital	50	36	86
	<u>293</u>	<u>272</u>	<u>565</u>
Clinic (including Hospital) attendances	...	...	1,335

Other forms of treatment were also given to children receiving tonsils and adenoids operations, and a few patients were detained in hospital for more than the normal period before or after operations for medical reasons.

All children were instructed to report to the school clinic two weeks after discharge from hospital for post-operative examination.

The numbers on the waiting list at 31st July, 1969 (including a number recommended other forms of treatment before operation) totalled 610 (357 boys and 253 girls).

## (ii) OTHER EAR, NOSE AND THROAT OPERATIONS

In addition to those treated for tonsils and/or adenoids, children to the number of 75 (39 boys and 36 girls) were admitted to Mearnskirk and Ear, Nose and Throat Hospitals during the year for operative and other treatment of various ear, nose and throat conditions. Some of the patients were treated for more than one defect.

## (D) ORTHOPAEDIC AND POSTURAL DEFECTS

The following are the statistics relating to the treatment of deformities at the five centres :—

	Boys	Girls	Total
Number of children examined by School Medical Officers ...	490	464	954
Orthopaedic Surgeon ... ..	759	620	1,379
Number of attendances of " old cases " reporting for observation	1,019	784	1,803

The staff of physiotherapists carried out treatment for the following cases :—

	Boys	Girls	Total
<i>Details of new cases put on treatment at Clinics—</i>			
Deformities of spine (kyphosis, lordosis, scoliosis) ... ..	111	122	233
Paralysis, infantile and other	36	19	55
Flat-foot and other deformities of the foot ... ..	177	177	354
Wry-neck (torticollis) ...	5	5	10
Deformities of chest ... ..	101	36	137
Knock-knees ... ..	66	70	136
Others ... ..	9	16	25
	<hr/>	<hr/>	<hr/>
	505	445	950
Cases from previous session ...	210	144	354
	<hr/>	<hr/>	<hr/>
Totals ... ..	<u>715</u>	<u>589</u>	<u>1,304</u>
	Boys	Girls	Total
<i>Discharged from Orthopaedic Clinic—</i>			
Fit ... ..	374	328	702
For Hospital treatment ...	3	1	4
Transferred to other clinic or treated by appliances ...	14	11	25
For other reasons (leaving school, improved, etc.) ...	130	94	224
	<hr/>	<hr/>	<hr/>
Totals ... ..	<u>521</u>	<u>434</u>	<u>955</u>
Number still on treatment ...	138	120	258
Number of attendances made by children for treatment	7,291	6,151	13,379

## DEFORMITIES TREATED IN SPASTIC UNIT

Treatment provided in the two departments was as follows :—

	No. of Cases Treated			No. of Treatments		
	Boys	Girls	Total	Boys	Girls	Total
Physiotherapy ... ..	27	17	44	5,388	2,692	8,080
Occupational Therapy	27	17	44	3,820	3,285	7,105

Of the 8 children (all boys) discharged during the year, two had attained school leaving age, five were excluded and one admitted to Westerlea.

Admissions during the Session were nine boys and three girls.

## (E) OTHER DISEASE

## (a) CASES DEALT WITH AT THE REGULAR CLINICS FOR "GENERAL" DISEASES :—

	Boys	Girls	Total
<i>Details of new cases—</i>			
Bronchitis and bronchial catarrh	294	199	493
Anaemia and/or debility ...	599	663	1,262
Rickets ... ..	2	7	9
Tubercular conditions—			
Pulmonary (including contacts)	—	—	—
Non-pulmonary ... ..	2	1	3
Paralysis ... ..	1	2	3
Heart disease ... ..	12	10	22
Chorea ... ..	1	—	1
Enlarged tonsils and/or adenoids	32	33	65
Adenitis ... ..	5	6	11
Rheumatism ... ..	10	11	21
Enuresis ... ..	494	427	921
Malnutrition ... ..	4	13	17
Epilepsy ... ..	6	2	8
Digestive disorders ... ..	25	36	61
Infectious diseases ... ..	6	5	11
Mental deficiency ... ..	6	—	6
Nervous disorders ... ..	30	27	57
Others ... ..	340	359	699
Single visit cases ... ..	2,314	1,954	4,268
	4,183	3,755	7,938
Clinic attendances of above cases	8,384	7,631	16,015

## (b) SUPPLY OF MEDICINES

<i>Details of new cases seen elsewhere than at "General" Clinics—</i>	Boys	Girls	Total
Sent from school inspection for immediate supply ... ..	78	59	137
Sent from skin, eye and ear clinics ... ..	1,849	1,783	3,632
Additional attendances at "General" Clinics for medicine	3,525	3,189	6,714
Totals ... ..	<u>5,452</u>	<u>5,031</u>	<u>10,483</u>

## (c) ARTIFICIAL LIGHT TREATMENT

<i>Details of new cases—</i>	Boys	Girls	Total
Anaemia and/or debility ... ..	111	160	271
Nervous disorders ... ..	2	—	2
Chronic bronchitis ... ..	67	36	103
Rheumatism ... ..	1	—	1
Skin conditions ... ..	22	27	49
Rickets ... ..	3	—	3
Others ... ..	2	2	4
Totals ... ..	<u>207</u>	<u>225</u>	<u>432</u>
Clinic attendances of above cases	2,933	3,530	6,463

## (d) CASES SEEN AT CARDIAC CLINICS

The Heart Specialist from Stobhill Hospital again attended school clinics for the purposes of examining school children specially referred by School Medical Officers and recommending any necessary treatment. During the Session, 444 children (240 boys and 204 girls) were summoned, of whom 97 (52 boys and 45 girls) failed to attend. The remainder reported as follows :—

New cases		Re-examinations		Totals	
Boys	Girls	Boys	Girls	Boys	Girls
125	100	63	59	188	159

The Specialist referred 13 children (6 boys and 7 girls) for further investigation at the Cardiology Clinic or for admission to Stobhill Hospital, where some were operated on for the treatment of certain forms of congenital heart disease. Electrocardiograms were carried out at the school clinics for 84 boys and 51 girls. In addition, three girls were referred to the E.N. and T. Specialist, one girl was referred for dental treatment and one boy to the Skin Specialist.

During the year, the children interviewed at special clinics and assessed as regards capability for suitable employment were as shown below :—

June, 1969, 2.

Since the commencement of the assessment scheme in June, 1950, 475 children in all have been interviewed at these special clinics.

(e) CASES SEEN AT NEUROLOGY CLINICS

Dr. I. Draper, Neurology Specialist from the Western Infirmary, attended school clinics for the purpose of examining children specially referred by School Medical Officers and recommending any necessary treatment.

During the Session 162 children (108 boys and 54 girls) were summoned, of whom 34 boys and 12 girls failed to attend. The remainder reported as follows :—

	New cases		Re-examinations		Totals	
	Boys	Girls	Boys	Girls	Boys	Girls
	54	28	20	14	74	42
Results were :					Boys	Girls
Not to return ... ..					27	15
To be reviewed later ... ..					47	27
<i>Recommendations—</i>						
For E.E.G. ... ..					32	19
For Hearing Investigation ... ..					2	—
To attend Special School ... ..					4	—
Refer to Stobhill Hospital ... ..					—	1
For Dyslexia Class ... ..					2	—
For Change of Medicine ... ..					6	6
For Speech Therapy ... ..					2	—
For Referral to Dr. Stone ... ..					—	1
For X-ray examination ... ..					1	—

(F) TREATMENT AT SPECIAL SCHOOLS

The total treatment given by nurses were as follows :—

	Boys	Girls	Total
Ear conditions ... ..	1,371	1,298	2,669
External eye defects ... ..	989	1,137	2,126
Skin diseases ... ..	13,014	10,778	23,792
Uncleanliness (nits, vermin, etc.)	10,549	14,564	25,113
Medicines issued ... ..	18,779	16,351	35,130

## SPECIAL SCHOOLS AND CLASSES AND RESIDENTIAL SCHOOLS

### (a) HANDICAPPED CHILDREN

Educational provision was made as follows in schools for handicapped children under the management of the Corporation :—

- (1) *Mentally Handicapped*—21 Day Schools, 1 Residential School and 11 Occupational Centres.
- (2) *Physically Handicapped*—9 Day Schools, 8 Hospital Schools and a Scheme of Home Tuition. (One day school made provision for spastic children and aphasic children between the ages of 3 and 16 years).
- (3) *Defective Vision*—1 Day/Boarding School for blind children and 1 day School for the partially sighted. The former serves the whole of Scotland and Northern Ireland and accommodates Roman Catholic children. (Protestant blind children attend the Royal Blind School, Edinburgh).
- (4) Defective hearing—1 Day School and 1 Day/Boarding School for the partially hearing and 2 Day/Boarding Schools for the Deaf. In addition, teachers from the Speech Reading Unit visit ordinary schools to give speech-reading instruction and auditory training to pupils not sufficiently deaf to require education by deaf methods. (Two teachers are also allocated to the Audiology Unit administered by Health and Welfare Department (Maternity and Child Welfare Section) where the hearing of young children under school age is investigated).

The age range for spastic children, blind children and those suffering from defective hearing is 3 to 16 years.

At 30th June, 1969, the number of children receiving special educational treatment in special schools administered by the Corporation was as follows :—

Physically handicapped children, 274 (including 47 in school for spastics, and 6 aphasic children); children with hearing defects, 224; children with defects of vision, 105; mentally handicapped (educable) children, 2,998; mentally handicapped (trainable) children, 429; total, 4,030.

### HOSPITAL SCHOOLS

The following is a list of the Hospital schools with the number of pupils receiving tuition at 30th June, 1969.

Drumehapel Home (31); Lenzie Home (25); Mearnskirk Hospital (20); Victoria Auxiliary Infirmary, Philipshill (19); Royal Hospital for Sick Children (55); Stobhill Hospital together with annexe at the Royal Infirmary (Burns Unit) (61); Strathblane Home (15); and Woodlands Day Centre (14).



## ASCERTAINMENT OF MENTAL HANDICAP

The number of children specially examined by School Medical Officers during the year regarding *mental defects* was as follows :—

	Boys	Girls	Total
First examinations ...	361	290	651
Re-examinations ...	764	619	1,383
	1,125	909	2,034

Provision for After-Care in terms of the National Health Service (Scotland) Act, 1947, was continued throughout the year by the Health and Welfare Department.

Other details are :—

- (i) Number of boys/girls suspected of mental handicap and referred for examination under Section 63(2) of the Education (Scotland) Act, 1962. Boys, 351 ; Girls, 245 ; Total, 596.
- (ii) Number of boys/girls ascertained as mentally handicapped and transferred to special schools or classes. Boys, 265 ; Girls, 176 ; Total, 441.
- (iii) Number of boys/girls ascertained as mentally handicapped and transferred to junior occupational centres. Boys, 36 ; Girls, 25 ; Total, 61.
- (iv) Number of boys/girls ascertained as mentally handicapped for whom no special educational facilities are available. On waiting list for Drummore School :—Boys, 2 ; Girls, 2 ; Total, 4.
- (v) Number of boys/girls who were the subject of a report under Section 65 of the Education (Scotland) Act, 1962. Boys, 15 ; Girls, 7 ; Total, 22.

## HOME TUITION SCHEME

At 30th June, 1969, the number of children participating in the Scheme was 19 and the main causes of incapacity were :—

Spina bifida, 3 ; arthritis, 1 ; asthma, 3 ; bowel and bladder defects, 1 ; miscellaneous, 11.

In addition to the foregoing provision, Glasgow children in need of specialised care and attention were accommodated and educated at the following Centres not under the management of the Corporation :—

*Coltness House, Wishaw*—3 severely physically handicapped children.

*Craigerne School, Peebles*—3 maladjusted pupils (primary age).

*Harmeny House School, Balerno, Midlothian*—3 maladjusted pupils (primary age).

*Lendrick Muir School, Rumbling Bridge, Perthshire*—5 maladjusted pupils (secondary age).

*The Mary Hare Grammar School, Newbury, Berks*—1 Roman Catholic deaf girl taking courses leading to the Certificate of Education.

*Trefoil School, Hermiston*—2 physically handicapped boys requiring residential education.

*Eastpark Homes, Glasgow and Largs*—3 severely physically handicapped children requiring long-term nursing care.

- Corseford School, Johnstone*—2 spastic children requiring residential education.
- Ladymary School, Edinburgh*—2 Roman Catholic maladjusted children.
- Castlecraig School, Peebles*—3 physically handicapped pupils requiring residential education.
- Kilquhanity House School, Castle Douglas*—1 maladjusted boy (secondary age).
- Stannmore House, Lanark*—16 mentally handicapped spastic children requiring residential training.
- Carsemeadow School at the Colony for Epileptics, Bridge of Weir*—12 children suffering from serious epilepsy.
- The Royal Blind School, Edinburgh*—22 Protestant blind children.
- The Royal Scottish National Hospital, Larbert*—26 mentally handicapped boys.
- St. Joseph's Private Hospital, Rosewell, Edinburgh*—2 mentally handicapped Roman Catholic children.
- St. Charles' Private Hospital, Carstairs*—23 Roman Catholic mentally handicapped children.
- Merchiston House Hospital, Johnstone*—3 mentally handicapped pupils.
- Waverley Park Hospital, Kirkintilloch*—29 mentally handicapped girls.
- Birkwood Hospital, Lesmahagow*—3 Protestant mentally handicapped children.
- Caldwell House Hospital, Uplawmoor*—14 mentally handicapped children.
- Bellefield Hospital, Lanark*—3 mentally handicapped children.

#### (b) MALADJUSTED CHILDREN—CHILD GUIDANCE

(Mr. G. A. DELL, *Principal Psychologist*)

During the year under review the Child Guidance Service dealt with a total of 5,469 children. This represents a reduction of 310 over last year's figures. Total clinic attendances were 39,799, an increase of 934. These changes are accounted for principally by a further reduction in the number of cases taken on for speech treatment owing to the loss of Speech Therapists during 1968/9, while the increase in total attendances was due to an increase of about a thousand in the number of psychological testing sessions, and an increase of about fifteen hundred in the number of attendances for educational help. For other categories attendance figures have remained fairly steady. Five thousand five hundred and twenty-nine school visits were paid, and 1,422 home visits.

Of the total number of children 815 were seen in connection with ascertainment procedures. The great majority of the remainder were cases of poor adjustment or educational retardation, and treatment was offered as appropriate.

The most frequently recorded age on referral was 8 years, and the ratio of boys to girls was 2 : 1. Approximately 14 per cent. of referrals were children of secondary age. This represents a slightly older mean age of referral than in most previous years.

Schools accounted for 3,514 referrals, and medical courses for 910. The remainder were referred by other statutory or voluntary organisations, and the number of referrals from Children's Department increased very sharply. Two hundred and eight-one children were referred directly by parents or by self referral.

Among the group referred for reasons of maladjustment 512 showed symptoms of enuresis, 465 temper tantrums, 438 theft, 364 attention-seeking behaviour, 302 persistent lying, 317 truancy, 316 exaggerated defiance of authority, and 279 extreme shyness and inhibition. Other large symptom groups included over-dependent and tearful attitudes, lethargy, aggressive and violent behaviour, fears, disturbed sleep, avoidance reactions, and soiling.

Fuller information can be found in the report on the Child Guidance Service issued annually by the Education Department. Among the principal developments described in the report for 1968/9 is the re-opening of Nerston as a residential school for maladjusted children of primary age. At the end of June, 1969 approximately 20 children were in residence at Nerston, and another 23 were enrolled at the Fairfield Day School for maladjusted children.

### (c) RESIDENTIAL SCHOOLS

The Centres outwith the City are listed below along with the accommodation available for pupils. Periods of residence varied according to the needs of the individual child and averaged four weeks for the normal child, four to six weeks for convalescents and two weeks for nursery children.

#### (i) NORMAL—

Achnamara, Lochgilphead ...	36	Protestant boys and girls (Secondary 1st year).
Galloway, Wigtown ... ..	112	Protestant boys and girls (Primary V, VI and VII).
Southannan, Fairlie ... ..		Partial replacement for Dalguise where lease terminated by Scottish Association of Boys Clubs.

#### (ii) CONVALESCENT—

Agnes Patrick/Stevenson, Ascog	58	Roman Catholic boys and girls (8-15 years).
Caol Ruadh, Colintrave ...		Closed for reconstruction.
Castle Toward, by Dunoon ...	96	Protestant boys and girls (8-15 years).
Craig, Kilmarnock ... ..	56	Roman Catholic boys (5-12 years).
Hillfoot, Bearsden ... ..	45	Protestant mentally handicapped children (7-13 years).
Lumsden, Maybole ... ..	29	Roman Catholic girls (5-12 years).
Scafield, Ardrossan ... ..	68	Protestant boys (5-12 years).
South Park, Ascog ... ..	28	Protestant girls (5-15 years).
Fornethy, near Alyth ... ..	74	Protestant girls (8-12 years).

## ARRANGEMENTS FOR FEEDING AND CLOTHING OF CHILDREN

### (a) ADMINISTRATION AND NUMBER OF MEALS

On 31st May, 1969, there were 132 kitchens preparing meals for school children. In addition, one kitchen supplied Kosher meals to Jewish children. On an average day in May, 1969 (Monday, 5th May), the total number of dinners served was 65,705 of which 26,442 were supplied free.

Dinners only were supplied to pupils of ordinary schools and schools for handicapped children. In Nursery Schools, dinners and teas were served, while a Health and Welfare Day Nursery received breakfasts, dinners and teas.

The meals were served in 412 dining-rooms, 393 of which were on school premises, the remainder being in church and other halls.

The number of dinners prepared in kitchens during the year ended 31st May, 1969, was 17,373,992 compared with 18,810,659 in 1968 and 17,914,043 in 1967.

### (b) FOOTWEAR AND CLOTHING

During the year 1st June, 1968 to 31st May, 1969, 1,732 children were provided with footwear and clothing as compared with 2,573 during the previous twelve months. The National Assistance Board continued to accept responsibility for the clothing requirements of children of their dependants.

### (c) MILK SUPPLIED TO SCHOOL CHILDREN

All milk supplied to schools under the Milk in Schools Scheme was Tuberculin-Tested (Pasteurised).

The total number of milk rations during the year ended 31st July, 1969, was 24,826,315, the reduced number issued being due to the discontinuance of milk to Secondary Schools from August, 1968. The most recent census figures showed that 94.06 per cent. of the children present in school on a particular day in January, 1969, were taking school milk compared with 95.3 per cent. in January, 1968.

Food Inspectors of the Health and Welfare Department took 117 samples of milk for examination and of that number 17 failed to pass the coliform test. The average composition of samples was satisfactory at 3.84 per cent. milk-fat and 8.84 per cent. non-fatty solids. Of 18 samples supplied for biological examination as to the presence of tubercle, all were found to be negative.

## CHILD NEUROLOGY UNIT

Dr. I. T. Draper, Consultant Neurologist, remarks that in a year marked by a succession of interesting and bewildering problems it has become increasingly apparent how dependent one is upon the advice and reports of the ancillary services. So much so, that in many instances it is not possible to give any helpful advice without this information.

There are two fields where this is of particular importance. In the assessment of slowly developing defective or absent speech, reliable audiometry is essential. In an effort to overcome the problem of non-co-operation in very young children attempts have been made to do sleep audio-encephalography. This too has its technical problems—in particular the variability of the response and the occurrence of artefact. The technicians at the Institute of Neurological Sciences have been engaged in building a tone and click audiometer with external triggering which could be used with an averaging computer, but a reliable prototype has not yet been achieved.

With Dr. Margaret Clarke from Strathclyde University the children provisionally labelled as dyslexic have been reviewed and all but one have been shown to have I.Q.s falling below the minimum figure normally accepted as the definition of the condition. Specific dyslexia, far from being the common condition some of its protagonists would have us believe, has been found to be extremely rare.

Similarly in examining children with behavioural disorders I have found no increase in the occurrence of "minimal" neurological deficit, compared with that for the general population, unless there is a correspondingly low I.Q. My impression is that given a normal intelligence a child will cope with a minor neurological disability without any emotional disturbance.

## HEALTH EDUCATION IN SCHOOLS

Health Education has been taught in Glasgow for a number of years, but today more than ever, there is an increasing need for Health Education in all its aspects. Today in our so called "civilised and permissive society" Health Education must be extended to the educated as well as the uneducated, the intelligent as well as the non-intelligent.

Health Education should begin in the home and at an early age. Fortunately, this does happen in some but, in the rest, for various reasons, this does not occur. There are too many children in overcrowded conditions, the parents overworked, overburdened and mothers out working. Later as the child grows up, there is failure of communica-

tion between parent and child, so it is necessary for someone else to step in and educate the child, in what is one of the most basic subjects. This is ultimately important to the well-being of Society.

The parents, of course, are the ideal people to do this, but as many fail to do so, it becomes the prerogative of the school teacher, the health visitor or the doctor. The person concerned must hold the child's interest and be able to talk frankly—without surprise or embarrassment. Failure in this, will result in the child not asking troubling questions. Children of all ages like visual aids. These are many and varied from filmstrips, films to flannelgraphs, charts, etc., and can be expanded with a little thought and homework by the teacher concerned.

More emphasis might be placed on the training of teachers in Health Education at the training colleges and while many teachers endeavour to overcome this by studying the subject at a later stage there are still too few teachers able to devote time to this very necessary subject in the curriculum. At the same time, there are aspects of the subject which lie particularly in the field of the school health visitor and school medical officer although there are too few of both of these groups to cover all the need which exists.

Classes should be small, about 10-15 because, if larger, then the children become embarrassed and reluctant to ask questions. A mixed class is probably best, as they get to know each other and become aware of how each matures and develops. The male attitude, especially to sex, tempers down the more romantic female notions. Once the class settles down there are often few disciplinary problems.

Sex education is a "must" today. When one questions 13-14 year-olds about this, about one third of the girls have been told a little about menstruation by their mother, but only the occasional boy has been given any information. Much is gleaned incorrectly and inadequately from older friends (the most frequent source) books, films, T.V.—sometimes by experience. There is little reason to believe that Michael Schofield's figures of sexual experience in young people in London do not pertain to the rest of the country, i.e. at the age of eighteen, 17 per cent. girls and 34 per cent. boys were sexually experienced. This is also reflected in questions children and teenagers ask. Work in Brook Advisory Clinics (advice to the unmarried) and Family Planning Clinics underline the need for adequate sex education. As well as imparting facts, many moral issues can be raised. Both sides of these should be discussed and the child should be left to make up his own mind.

## THE STUDENT HEALTH SERVICE IN FURTHER EDUCATION COLLEGES

In Glasgow, 11 Further Education Colleges provide pre-vocational training for over 25,000 students, of whom 3,123 receive full-time training.

Every student entering a full-time course of study is required by law to have a medical examination, and for this purpose a School Medical Officer and Health Visitor visit each college at regular intervals. This aspect of the Student Health Service is becoming increasingly important as students whose health would formerly have prevented them from attending college are now able, with medical supervision and long-term treatment to benefit from further education. It is important that the medical officer should know of such students so that they may be directed away from unsuitable occupations, and receive advice if necessary. Further, a considerable number of students live in lodgings where they have no general practitioner upon whom they may call, and while they are advised to make the necessary arrangements in case of an emergency, the college doctor may be able to help with less acute conditions.

Health Education of course plays a large part in the Student Health Service.

The co-operation of college teaching staffs is greatly appreciated, and has been beneficial in presenting to these young people not just a set of rules for healthy living, but rather a much broader view to enable each to make the most of himself mentally and physically in his own particular environment.

## HOSPITAL SCHEME FOR SCHOOLS

The Hospital Scheme for Schools has now been in operation for four years and provides an opportunity for girls of 14½ years of age and over to give a service to the community and at the same time widen the field of their education in a practical way.

Forty-eight schools and twenty-two hospitals participated in the Scheme this year involving approximately 900 girls. Three of the hospitals have been accepting boys also but latterly schools have found it difficult to select boys of suitable calibre who were not already involved in certificate courses in school. At present no boys are participating.

Girls who are following the Homecraft based " People and Health " Course in school are all included in the Hospital Scheme which is a decided advantage to the pupils as the term in hospital provides the practical experience required.

The duties are varied and it would appear that the service they give is particularly useful in the children's and geriatrics' wards.

The co-operation of the matrons and nursing staff of the hospitals has contributed greatly to the success of the Scheme, and girls have benefited through their contact with the nurses in the wards, staff dining room and common room which they have been privileged to use.

The Hospital Scheme is an admirable fulfilment of the recommendation laid down in the Newsom Report " Half Our Future " (Chapter 17).

#### NURSERY SCHOOLS

In Nursery Schools the School Medical Officer meets normal pre-school children, in moderate numbers, for the first time. It is worth considering some of the differences in dealing with this group. Usually they are seen at routine examinations without a parent and much detail of the medical history is not available. The Medical Officer's approach to the child must be such that it readily evokes co-operation, as a three-year-old will readily give vent to his feelings if he is frightened. A Nursery School, perhaps more than any other unit, lends itself to a policy of being always vigilant. The first examination, although apparently normal, should not be the last. Discussions with the staff together with the background knowledge of the Health Visitor, will contribute greatly to the sum of knowledge about any child.

Since Nursery Schools are educational establishments, early detection and possible treatment of defects affecting a child's ability to learn, are of paramount importance. By the age of three any strabismus, however slight or transient, is worthy of investigation. A " wait and see " policy should not be adopted. Testing the visual acuity is difficult at two years of age but satisfactory results should be obtained in the older children. Similarly, where there is any suspicion of a hearing defect the child should have an audiological examination. Poor speech is not an uncommon finding in pre-school children and, since speech is a very complex faculty, it requires considerable experience and patience to recognise what is within normal limits. However, for practical purposes it is useful to consider whether the defective articulation is due to a lack of hearing, a defect of speaking, or a deficiency of language. Therefore the appropriate investigations should be carried out.



The possibility of the occasional mentally retarded child in the Nursery School should always be kept in mind. He may be a border-line case and not stand out from other children. On observation this child may show no interest in toys, games or other children; never be in trouble; often the situation may be complicated by a home background which provides neither stimulation nor opportunity. The child with emotional and behaviour difficulties may also be suspected. He may be excessively shy, timid and fearful, or aggressive, jealous and may have outbursts of temper-tantrum. A close liaison with the Educational Psychologist at the Child Guidance Clinic will offer the most likely solution to many of these problems.

Acute respiratory infections are common in this age and the ears and the chest require close attention. Orthopaedic problems are less common but offer a very interesting facet of the work. Enuresis is common in Nursery School children but provided organic disease can be excluded it is still virtually physiological; in contrast encopresis is rather rare but should be considered abnormal until proved otherwise. The fairly recently introduced scheme for part-time children in Nursery School is satisfactory and well established. Even from homes in the same area, the part-time children usually come for "educational benefit" while the full-time children tend to be admitted because of "bad social background," "a broken home" or "maternal illness." Nursery School children will no longer attend Residential School. This change marks the end of an era which began early this century when the children and staff from the first Nursery School in Dobbie's Loan went for their annual holiday to the Clyde coast. Far from being a pleasant back-water where the child may pass two to three pre-school years the Nursery School may be the very corner-stone of a child's physical, intellectual, emotional and social development. It offers a great opportunity for his early ascertainment.

## AUDIOMETRIC SURVEY UNIT REPORT

1968 - 1969

The report of the Audiometric Survey Unit this year opens on a tragic note in recording the deaths of Dr. John Leonard and Dr. Hugh McFarlane who had rendered years of excellent service and contributed substantially to the working of the Unit. They are greatly missed. Another medical member of the team left Glasgow to take up an appointment in general practice. Thus the medical personnel was gravely depleted and the various projects underway were slowed down of necessity.

However, two members of staff interested in this work have had in-training and one has had the opportunity of attending the Manchester University course for medical officers and the other will follow suit.

The audiology technician staff has also lost one member who went abroad and the junior member was at the Regional Hospital Board refresher course in June, so again the load fell heavily on the remaining two members. The June commitment covered the audiometry required for the National Child Development Survey. As in previous years, the staff demonstrated to doctors, health visitors, and others the working of the Unit and helped in the Regional Hospital Board training scheme for audiology technicians. They also offered their services in areas outwith the City in their off duty period where that help was required in a non-manned area. The new Kamplex Audiometer is proving very efficient and it is hoped to carry out speech audiometry with it.

This year a pilot scheme of screening five-year-old children was carried out and proved successful, thus the age of choice for screening during next Session will be lowered from the 5½-6 group to school entrants.

The case load of the Otologist, Mr. Bain, continues to increase, as most of the children seen require to be reviewed annually or biannually and so these numbers, added to the new cases, spiral. Hospitalisation for surgical procedures through this close otological linkage are easily and quickly arranged to the benefit of the children and the help and advice too of Mr. Simpson, Consultant Otologist, Victoria Infirmary, in other aspects of the audiometric scheme is greatly appreciated.

More children are appearing in the ambit of the survey scheme under the age of five with delayed speech development probably because of the increased awareness of investigating hearing in all cases of this type. Equally, the regular reports on each child seen which are sent to the appropriate general practitioner bring the knowledge of the service offered to his notice and, in turn, increase referrals.

In these cases too, where psychometric evaluation is necessary, this can be asked for through the Child Guidance Service and neurological advice can be had from Dr. Draper, Consultant Neurologist. These types of investigations are being made frequently as are case counsellings leading to the advice to the Education Authority as to recommended placing.

This year, monthly meetings have been held with the staff of the peripatetic teachers of the deaf, Speech Reading Unit, when medical and educational problems arising in children with hearing deficits in ordinary schools have been discussed.

Ascertainment of the young child with hearing deficit in the Balvicar Centre entails a monthly visit by Otologist, Medical Officer and Health Visitor and case counselling sessions are held with each child. An interesting situation arose when an Indian child with non-English speaking mother was reviewed, and the presence of an Indian medical registrar solved the language difficulty. It is difficult to disregard the factors of the language complications arising in a deaf or partially hearing child where the school language is English and house language is non-English. We have been fortunate to have the services of an Indian/English trained psychologist doing psychometric and social background reports and an Indian teacher has acted as an interpreter in one or two cases.

Health Visitors working in the Unit and in schools for the deaf and partially hearing have been doing a lot of family visiting in connection with problems arising in school and brought to the notice of the team by teachers. This is proving very valuable and parents have expressed their appreciation of the help offered.

The continuous support given by the headmasters of the Glasgow schools, the Child Guidance Service, Speech Reading Unit, Audiology Unit is, as always, much appreciated and the Special Schools Department works closely and happily with the Unit. The head teachers of the deaf schools and partially hearing schools too are firmly linked to the work of the team.

#### DENTAL INSPECTION AND TREATMENT REVIEW

The figures quoted in this section and detailed in Table 13 refer to school children only. A summary of dental treatment for Mother and Child Welfare patients is given elsewhere in the report. Dental figures given in Tables 2 and 3 refer solely to conditions reported by *doctors* doing *medical* examinations.

The amount of treatment carried out during the year shows that the work of the Dental Section is still expanding. Compared with the previous year, routine dental inspections increased by 12 per cent.,

the number of children treated increased by over 12 per cent., fillings increased by nearly 20 per cent. and extractions by nearly 18 per cent. These improvements were carried out with an increase of 9 per cent. in staff. An analysis of the Scottish Home and Health Department states that the work done per dental officer in Glasgow is well above the Scottish average.

The dental situation among Glasgow school children is still deplorable. Even at the age of five years, 83 per cent. require dental treatment and the overall figure of 78·3 per cent. compares very badly with the Scottish average of 68·7 per cent. requiring treatment. Because eating habits have deteriorated over the years, the compensating factors of modern knowledge, materials and equipment have been unable to improve the caries rate over the past 40 years. This rate, apart from the improvement resulting from a war time diet has remained constant at about 80 per cent. Prevention is therefore the only way to improve the situation. As a long term policy, talks were given to 50,000 children and 20,000 tooth cleaning packs were issued to new school entrants. Real benefit, however, can only be obtained within the foreseeable future by employing a much more definite and effective method such as the use of fluoride. Fluoridation is still under consideration by the Health Committee ; should it be ultimately turned down, some form of mass topical application will be essential.

## PHYSICAL EDUCATION

(Mr. W. TINTO, *Adviser in Physical Education*)

The staffing situation in Physical Education during the year 1968-69, in common with all other subjects, was far short of the essential needs of a subject which has now extended far beyond the confines of the school. Many schools in addition to the normal curriculum offer their pupils a choice of outdoor activities which may take place after school hours or at weekends or may involve a group of pupils being absent from school for a week or more. Where Head Teachers find it difficult to meet the normal requirements of the school Physical Education timetable, it is only by the voluntary efforts of enthusiastic members of staff that such activities can be carried on. The time spent by members of school staffs from all departments on such activities has reached fantastic proportions and serious thought must be given by those in authority to the question of compensation in kind or in payment for the time and the effort which is freely given by these teachers to enable pupils to pursue these health giving activities

The Education Committee continue to extend the Physical Education facilities with the opening of new schools, playing fields, games halls and swimming pools. The games halls at St. Margaret Mary's, S. Pius', Waverley and Westwood Secondary Schools will supply a growing demand for facilities for games coaching without the restrictions imposed by vicious weather conditions, whilst the swimming pools at St. Gerard's, Govan, the Glasgow High School for Girls, and at Shawlands bring this healthy aspect of Physical Education within the reach of secondary school pupils, primary pupils and also of the community. The fullest use, however, of the playing fields at Toryglen and Shieldhall still awaits the provision of adequate changing accommodation.

In the primary schools there is a growing awareness by teachers of the educative value of Inventive Movement as opposed to teacher directed activities, accompanied by a growing confidence on the part of pupils in the use of apparatus provided in the primary schools. Many primary teachers also take part in the teaching of swimming and in the teaching of games such as netball and hockey hitherto considered the prerogative of the secondary school. If this confidence on the part of the pupils is developed and maintained, it augurs well for the secondary school when the time comes for these primary pupils to take up their secondary education. There is every argument for enlisting the enthusiasm, the energy and the healthy interest of the pupil at the primary stage of his school life in the approach to all aspects of Physical Education.

## STATISTICAL APPENDIX

TABLE 1

MEDICAL EXAMINATIONS OF SCHOOL CHILDREN BY  
AUTHORITIES

Local Authority	ENTRANTS				LEAVERS			
	No. of Examinations		Percentage With Defects		No. of Examinations		Percentage With Defects	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Aberdeen Burgh ...	1,368	1,332	61·04	56·68	—	—	—	—
Dundee ... ..	1,549	1,445	47·13	41·38	1,270	1,275	48·66	47·29
Edinburgh ... ..	3,101	3,121	61·30	56·94	2,432	2,256	47·53	48·14
<b>Glasgow ... ..</b>	<b>9,141</b>	<b>8,486</b>	<b>51·45</b>	<b>50·87</b>	<b>7,323</b>	<b>7,388</b>	<b>44·63</b>	<b>43·42</b>
Aberdeen County ...	927	874	55·66	49·43	—	—	—	—
Angus ... ..	769	666	46·16	40·54	595	615	37·56	32·03
Argyll ... ..	391	371	65·98	50·94	331	316	51·96	50·32
Ayr County ... ..	3,230	2,962	42·54	38·93	2,255	2,251	40·49	39·58
Banff ... ..	309	290	61·49	57·93	308	301	37·01	42·52
Berwick ... ..	168	154	58·33	50·00	135	148	37·04	34·46
Bute ... ..	105	99	50·48	39·39	70	92	52·86	55·43
Caithness ... ..	261	265	30·65	27·92	180	198	23·33	33·84
Clackmannan ... ..	367	331	26·16	16·01	267	283	39·70	71·38
Dumfries County ...	663	654	58·97	52·75	606	633	57·59	54·66
Dunbarton ... ..	2,178	2,087	49·36	51·13	1,491	1,436	40·64	37·33
East Lothian ... ..	464	467	68·97	60·81	363	400	52·89	53·75
Fife ... ..	2,356	2,424	48·30	41·71	1,181	1,244	47·59	39·31
Inverness County ...	804	698	63·06	59·89	616	589	39·29	38·88
Kincardine ... ..	171	206	50·29	41·26	169	162	24·85	29·01
Kirkcudbright ...	378	339	79·89	78·76	—	—	—	—
Lanark ... ..	6,278	5,916	62·25	58·16	6,136	6,088	49·54	48·23
Midlothian ... ..	1,135	1,056	54·89	48·86	685	607	41·31	40·53
Moray and Nairn ...	440	464	38·18	34·27	395	373	35·95	34·32
Orkney ... ..	132	113	58·33	59·29	46	54	41·30	38·89
Peebles ... ..	89	106	62·92	51·89	83	79	33·73	35·44
Perth and Kinross ...	899	920	37·93	31·30	757	832	24·44	21·75
Renfrew ... ..	3,517	3,365	55·10	50·10	2,439	2,441	46·33	43·79
Ross and Cromarty ...	406	398	54·93	51·51	430	435	22·79	17·47
Roxburgh ... ..	382	362	49·21	44·20	293	239	48·46	44·35
Selkirk ... ..	145	133	35·86	34·59	160	136	30·63	35·29
Stirling County ...	1,926	1,816	57·94	50·22	1,411	1,366	44·72	45·97
Sutherland ... ..	98	104	40·82	41·35	99	87	36·86	32·18
West Lothian ... ..	1,052	1,058	52·09	43·38	515	721	39·61	38·00
Wigtown ... ..	271	241	67·53	71·78	225	237	45·78	45·57
Zetland ... ..	69	60	13·04	8·33	29	13	17·24	30·77
Scotland ... ..	45,539	43,383	53·75	49·78	33,295	33,295	44·42	43·21

TABLE 2

RATES OF DEFECTS FOUND AMONG GLASGOW SCHOOL CHILDREN SEEN AT ROUTINE MEDICAL INSPECTION

(Rates per 100,000 examined)

DISEASE OR DEFECT Degree and Etiology	Entrants		Leavers	
	Boys	Girls	Boys	Girls
<i>Infective and Parasitic—</i>				
Viral Enteritis ... ..	—	—	—	14
Tuberculosis of Bones or Joints ... ..	11	—	—	—
Acute Poliomyelitis ... ..	—	—	14	—
Late Effects of Acute Poliomyelitis ... ..	—	—	—	14
Ringworm ... ..	22	—	410	81
Psittacosis ... ..	11	—	—	—
Trichomoniasis Urogenitalis ... ..	11	—	—	—
Pediculosis ... ..	974	2,522	1,488	4,304
Scabies ... ..	470	412	437	244
<i>Skin Disease—</i>				
Warts, Verruca ... ..	339	389	587	636
Boil or Carbuncle ... ..	33	—	55	27
Impetigo ... ..	252	224	82	14
Eczema (not specified as allergic) ... ..	449	448	437	433
Eczema (due to detergents) ... ..	11	—	—	—
Eczema (allergic) ... ..	459	295	164	95
Psoriasis ... ..	88	59	137	311
Corns ... ..	—	—	—	14
Ichthyosis ... ..	33	24	—	14
Keloid Scar ... ..	44	12	14	—
Alopecia Areata ... ..	33	24	14	27
Acne ... ..	—	12	901	1,868
Urticaria ... ..	569	389	218	135
Hairy Mole, Pigmented Naevus ... ..	66	12	55	27
<i>Teeth and Mouth—</i>				
Adontia ... ..	—	24	14	—
Impacted Teeth ... ..	—	—	55	41
Dental Caries ... ..	17,022	18,030	9,422	7,864
Attrition of Teeth ... ..	22	—	—	—
Ankylosis of Teeth ... ..	11	24	14	—
Disease of Tissue of Teeth ... ..	11	—	—	—
Dental Abscess ... ..	66	82	—	27
Atrophy of Salivary Glands ... ..	22	47	27	14
Stomatitis ... ..	11	12	27	—
Chronic Gingivitis ... ..	—	—	—	14
Cleft Palate ... ..	55	—	—	14
Hare Lip ... ..	11	35	14	—
Cleft Palate and Hare Lip ... ..	22	24	14	—
<i>Ear, Nose and Throat—</i>				
Chronic Nasopharyngitis ... ..	514	412	218	108
Deflected Nasal Septum ... ..	11	—	82	27
Nasal Polyposis ... ..	—	—	14	—
Hay Fever ... ..	—	12	123	95
Otitis Externa ... ..	11	—	—	—
Otitis Media—Acute ... ..	131	200	55	68
Otitis Media—Chronic Suppurative ... ..	219	259	328	189
Eustachian Catarrh ... ..	153	118	14	41
Acute Mastoiditis ... ..	11	—	—	—
Epistaxis ... ..	11	—	—	—
Acute Tonsillitis ... ..	88	106	27	108
Tonsillar Hypertrophy (or Adenoids) ... ..	8,424	8,308	1,407	1,949
Ménière's Disease ... ..	—	—	—	14

TABLE 2—Continued

DISEASE OR DEFECT Degree and Etiology	Entrants		Leavers	
	Boys	Girls	Boys	Girls
<i>Hearing Defects—</i>				
Complete loss of hearing (both ears) ...	44	71	68	68
Complete loss one, part deaf other ...	11	—	14	14
Deafness in one ear ... ..	11	24	68	68
Impaired hearing (one or both ears) ...	372	306	423	271
<i>Eyes—</i>				
Chalazion ... ..	—	—	14	14
Conjunctivitis ... ..	77	35	55	27
Blepharitis ... ..	416	471	847	636
Stye ... ..	33	47	68	14
Corneal Ulcer ... ..	11	—	—	—
Refractive Errors ... ..	2,144	2,416	13,273	13,305
Corneal Opacity ... ..	33	—	109	—
Strabismus ... ..	2,341	2,475	942	690
Vascular Lesions of Retina ... ..	—	12	82	—
Colour Blindness ... ..	186	12	1,830	81
Ptosis of Eyelid ... ..	—	—	—	14
Blindness (both eyes) ... ..	33	35	68	28
Blindness (one eye) ... ..	22	24	191	95
Iritis ... ..	11	—	14	—
Other Inflammation of Uveal Tract ...	11	—	—	—
Glaucoma ... ..	—	—	14	14
Amblyopia ... ..	—	—	14	—
<i>Speech Defect—</i>				
All forms of speech defect ... ..	1,936	978	205	54
<i>Lungs—</i>				
Acute Bronchitis ... ..	591	318	123	54
Chronic Bronchitis ... ..	624	283	191	149
Asthma ... ..	996	247	1,024	325
Bronchiectasis ... ..	—	24	14	14
Primary Tuberculous Complex ... ..	11	12	55	41
<i>Heart and Circulation—</i>				
Aplastic Anaemia ... ..	—	—	14	—
Hypochromic Anaemia ... ..	22	24	41	14
Lymphatic Leukaemia ... ..	—	—	—	14
Anaemia (unspecified) ... ..	284	247	341	365
Rheumatic Fever ... ..	—	12	—	—
Rheumatic Chorea (with heart involvement)	11	—	—	—
Rheumatic Chorea (without mention of heart involvement) ... ..	—	—	—	14
Chronic Rheumatic Heart Disease ... ..	11	—	82	135
Disease of Mitral and Aortic Valves ...	—	—	—	14
Aortic Septal Defect ... ..	11	—	—	—
Fallot's Tetralogy ... ..	—	—	14	14
Interventricular Septal Defect ... ..	66	71	55	41
Interatrial Septal Defect ... ..	22	12	41	14
Other Malformations ... ..	22	71	68	81
Patent Ductus Arteriosus ... ..	44	24	14	14
Coarctation of Aorta ... ..	11	—	14	—
Phlebitis ... ..	—	—	14	—
Precordial Pain ... ..	—	—	—	14
Shock without mention of trauma ...	—	—	14	—



TABLE 2—Continued

DISEASE OR DEFECT Degree and Etiology	Entrants		Leavers	
	Boys	Girls	Boys	Girls
<i>Orthopaedic—</i>				
Osteomyelitis (unspecified) ... ..	—	—	—	14
Osteochondrosis ... ..	55	12	—	—
Cervicalgia ... ..	11	—	—	—
Bunion ... ..	—	—	14	—
Bursitis ... ..	22	—	27	14
Infective Myositis ... ..	44	35	41	95
Myasthenia Gravis ... ..	11	12	14	—
Muscular Atrophy (idiopathic) ... ..	11	—	—	—
Curvature of Spine ... ..	208	200	533	717
Flat Foot ... ..	689	872	642	528
Hallux Valgus and Varus ... ..	11	24	55	271
Hallux Rigidus, Genu Valgum, etc. ...	963	1,638	123	325
Club Foot ... ..	66	130	55	54
Other Congenital Anomaly of lower limb	33	—	—	14
Congenital Anomaly of Spine ... ..	—	—	—	14
Congenital Anomaly (unspecified) ...	98	24	82	68
<i>Urogenital Conditions—</i>				
Nephrotic Syndrome ... ..	—	—	—	14
Chronic Nephritis ... ..	—	12	—	—
Infections of Kidney ... ..	11	35	14	27
Other Pyelonephritis ... ..	—	—	14	—
Undescended Testes ... ..	689	—	55	—
Hypospadias ... ..	55	—	14	—
Cystitis ... ..	—	82	27	14
Hydrocele ... ..	11	—	—	—
Paraphimosis ... ..	44	—	—	—
Indeterminate Sex ... ..	22	—	—	—
<i>Emotional—</i>				
Anxiety Neurosis ... ..	22	24	—	—
Paranoid (traits) ... ..	22	24	41	14
Emotional Instability ... ..	295	247	96	95
Aggressiveness ... ..	33	47	—	—
Passive Dependency ... ..	142	106	27	14
Asocial Personality (Psychopath) ...	22	12	—	—
Anxiety State ... ..	11	12	—	41
Astasia ... ..	11	12	—	—
Anorexia Nervosa ... ..	11	—	—	—
Enuresis ... ..	3,479	3,382	355	176
Transient Situational Disturbances ...	—	12	—	14
Nervousness ... ..	—	—	14	—
<i>Neurological—</i>				
Late effects of Intracranial Abscess ...	—	—	—	14
Progressive Muscular Dystrophy ... ..	—	—	14	—
Multiple Sclerosis ... ..	—	—	14	—
Cerebral Palsy (congenital or infantile) ...	98	47	27	68
Cerebral Palsy (due to unspecified causes)	22	—	—	—
Epilepsy (Petit Mal) ... ..	98	118	109	122
Epilepsy (Grand Mal) ... ..	55	71	109	176
Migraine ... ..	11	12	191	108
Bell's Palsy ... ..	—	—	27	—

TABLE 2—Continued

DISEASE OR DEFECT Degree and Etiology	Entrants		Leavers	
	Boys	Girls	Boys	Girls
<i>Mental Retardation—</i>				
Borderline Mental Retardation—				
Following infections and intoxications ...	77	47	819	311
Following trauma or physical agents ...	11	—	41	—
Associated with gross brain disease (postnatal) ... ..	—	—	—	14
Associated with diseases and conditions due to (unknown) prenatal influence ...	11	—	14	14
Associated with prematurity ... ..	22	—	—	27
With psycho-social (environmental) de- privation ... ..	—	—	27	27
Other and unspecified ... ..	44	47	410	217
Mild Mental Retardation—				
Following infections and intoxications ...	66	47	341	447
Following trauma or physical agents ...	11	—	—	14
With disorders of metabolism, growth or nutrition ... ..	—	—	14	41
Associated with diseases and conditions due to (unknown) prenatal influence ...	11	—	—	—
With chromosomal abnormalities ... ..	11	—	—	—
Associated with prematurity ... ..	—	—	—	14
With psycho-social (environmental) de- privation ... ..	—	—	14	—
Other and unspecified ... ..	33	24	205	514
Moderate Mental Retardation—				
Following infections and intoxications ...	11	12	27	41
Following trauma or physical agents ...	—	—	—	14
With chromosomal abnormalities ... ..	—	12	41	27
Other and unspecified ... ..	22	—	27	—
Profound Mental Retardation—				
Following infections and intoxications ...	11	35	27	—
<i>Other Diseases or Defects—</i>				
Simple Goitre (unspecified) ... ..	—	12	—	27
Swollen Glands (unspecified) ... ..	208	424	41	54
Cretinism ... ..	11	12	—	—
Myxoedema ... ..	—	12	—	—
Diabetes Mellitus ... ..	—	12	27	81
Niacin Deficiency ... ..	—	—	14	—
Other Vitamin B. Deficiency ... ..	—	12	—	—
Malnutrition (Protein) ... ..	394	483	218	68
Coeliac Disease ... ..	131	130	41	27
Underweight ... ..	55	12	41	—
Obesity ... ..	241	330	1,516	2,247
Common Cold ... ..	1,225	1,061	628	596
Inguinal Hernia ... ..	252	35	27	—
Femoral Hernia ... ..	22	—	—	—
Umbilical Hernia ... ..	44	106	—	—
Appendicitis (unqualified) ... ..	—	12	14	14
Gastro-enteritis or Colitis ... ..	11	—	—	14
Constipation ... ..	11	—	—	—
Fracture of Nose ... ..	—	—	14	—
Fracture of Mandible ... ..	—	24	27	14
Fracture of Elbow ... ..	11	—	—	—
Fracture of Ankle ... ..	—	—	—	14
Traumatic Amputation of Leg (late effect)	—	12	—	—
Burn of Hand ... ..	11	—	—	—

MEDICAL EXAMINATION

TABLE 3

TABLE 3  
 RATES OF DEFECTS PER 100,000 EXAMINED BY SOCIAL CLASS OF GLASGOW SCHOOL CHILDREN  
 10 PER CENT. SAMPLE

DISEASE OR DEFECT DEGREE AND ETIOLOGY	ENTRANTS SOCIAL CLASS						LEAVERS SOCIAL CLASS							
	1	2	3	4	5	Other or Not Stated	Total	1	2	3	4	5	Other or Not Stated	Total
<i>Insective and Parasitic—</i>														
Ringworm	Boys	—	—	—	—	—	—	3,704	—	557	—	—	—	410
	Girls	—	—	—	—	—	—	—	—	—	—	—	—	—
	Boys	—	215	—	1,770	549	426	—	—	1,114	1,020	2,727	6,977	1,913
	Girls	—	2,133	—	3,000	4,545	3,368	—	1,818	3,655	4,762	8,696	7,778	4,787
	Boys	—	—	—	885	549	319	—	—	557	—	—	2,326	546
	Girls	—	2,326	—	—	—	232	—	—	—	—	870	—	133
	Boys	—	2,128	1,290	885	1,099	1,065	—	—	279	—	1,818	—	410
	Girls	—	—	1,422	1,000	1,136	1,045	—	—	783	—	870	—	532
<i>Skin Disease—</i>														
Warts and Verruca	Boys	—	—	—	—	549	426	—	—	557	—	—	—	410
	Girls	—	2,326	237	—	—	348	4,000	—	—	3,571	—	—	532
	Boys	—	—	—	—	549	106	—	—	—	—	—	—	—
	Girls	—	—	237	—	—	116	—	—	—	—	—	—	—
	Boys	—	—	215	—	549	213	—	—	—	—	—	—	—
	Girls	—	—	474	—	568	348	—	—	—	—	—	—	—
	Boys	—	—	860	—	—	532	—	—	836	1,020	909	1,163	820
	Girls	—	—	237	3,000	—	465	—	—	261	—	1,739	1,111	532
	Boys	—	—	215	—	—	106	—	—	—	—	—	—	—
	Girls	—	—	—	—	—	—	—	—	261	—	—	—	133
	Boys	—	—	430	1,770	—	426	—	—	279	—	909	—	278
	Girls	—	—	—	1,000	—	348	—	—	261	—	—	—	133
	Boys	—	—	—	—	549	213	—	—	—	—	909	—	137
	Girls	—	—	237	—	—	116	—	—	783	—	870	1,111	665
	Boys	—	—	—	—	—	—	—	3,846	279	—	—	—	410
	Girls	—	—	—	—	—	—	—	5,455	2,089	2,381	2,609	1,111	2,261













TABLE 3—Continued

DISEASE OR DEFECT DEGREE AND ETIOLOGY	ENTRANTS SOCIAL CLASS						LEAVERS SOCIAL CLASS							
	1	2	3	4	5	Other or Not Stated	Total	1	2	3	4	5	Other or Not Stated	Total
	<i>Other Diseases or Defects—</i>													
Diabetes Mellitus	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Protein Malnutrition	—	—	215	—	—	943	213	—	—	261	—	—	—	133
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	—	—	1,000	568	2,151	465	—	—	261	—	—	—	133
Codiac Disease	—	2,128	—	—	—	1,887	319	—	—	—	—	—	1,163	137
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	2,128	—	—	—	—	—	—	1,923	836	2,041	1,818	—	1,093
Obesity	—	—	237	—	—	—	106	—	1,818	1,567	1,190	4,348	—	1,729
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	—	237	—	—	—	106	—	—	—	—	—	—	—
Constipation	—	—	215	—	—	—	—	—	—	—	—	—	—	—
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Inguinal Hernia	—	—	—	885	—	—	106	—	—	—	—	—	—	—
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Umbilical Hernia	—	—	215	—	—	—	106	—	—	—	—	—	—	—
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Swollen Glands (unspecified)	—	—	215	—	549	—	213	—	—	279	—	—	—	137
Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Girls	—	—	237	—	—	—	116	—	—	—	—	—	—	—

TABLE 4

## AVERAGE HEIGHTS AND WEIGHTS BY AUTHORITIES

Local Authority	Entrants				Leavers			
	Boys		Girls		Boys		Girls.	
	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Lbs.)
Aberdeen Burgh ...	43.33	43.72	43.06	42.58	—	—	—	—
Dundee ...	42.66	42.29	42.36	41.02	60.65	98.01	60.76	104.16
Edinburgh ...	43.01	42.74	42.71	41.66	60.66	98.68	60.98	106.13
<b>Glasgow ...</b>	<b>42.47</b>	<b>42.15</b>	<b>42.22</b>	<b>41.10</b>	<b>59.91</b>	<b>97.15</b>	<b>59.97</b>	<b>110.68</b>
Aberdeen County ...	43.66	44.52	43.15	43.15	—	—	—	—
Angus ...	44.00	45.14	43.52	43.44	61.04	103.20	61.19	107.27
Argyll ...	43.97	44.70	43.32	43.10	61.07	102.05	61.04	106.88
Ayr County ...	43.37	43.36	43.08	42.30	61.23	101.64	61.02	105.17
Banfi ...	43.49	44.06	43.04	42.71	60.29	99.77	60.37	104.20
Berwick ...	42.88	42.26	42.64	41.61	61.09	102.77	61.74	110.44
Bute ...	43.26	43.42	42.90	42.53	61.19	101.97	60.74	106.00
Caithness ...	43.59	44.98	43.12	42.94	61.02	101.51	61.26	108.48
Clackmannan ...	42.29	42.31	42.01	41.57	60.04	98.16	59.92	105.81
Dumfries County ...	43.87	43.66	43.29	42.39	60.73	98.24	61.12	105.77
Dunbarton ...	43.37	42.82	42.91	41.33	60.52	99.17	60.67	104.06
East Lothian ...	43.83	44.57	43.11	42.37	60.69	102.58	61.15	108.51
Fife ...	42.84	42.49	42.48	41.22	60.84	98.73	60.83	103.59
Inverness County ...	43.10	43.65	42.69	42.36	61.33	102.81	61.03	106.68
Kincardine ...	44.17	44.50	43.59	42.31	60.64	99.66	60.86	103.46
Kirkcudbright ...	43.98	44.07	43.42	42.81	—	—	—	—
Lanark ...	43.60	43.37	43.32	42.24	61.23	100.67	61.09	105.79
Midlothian ...	44.01	43.94	43.59	42.72	61.27	101.32	60.84	105.46
Moray and Nairn ...	42.80	42.58	42.60	41.94	61.10	101.10	61.08	105.02
Orkney ...	44.70	45.20	43.96	44.63	62.09	108.37	60.91	107.70
Peebles ...	43.85	43.73	43.56	43.55	61.88	103.52	61.52	106.62
Perth and Kinross ...	43.23	43.44	42.98	42.43	61.63	104.06	61.51	109.25
Renfrew ...	43.09	42.71	42.56	41.08	60.37	98.13	60.35	102.40
Ross and Cromarty ...	42.94	43.84	42.75	43.05	61.09	104.14	61.23	108.37
Roxburgh ...	42.74	42.69	42.46	42.18	60.65	98.19	61.11	107.50
Selkirk ...	42.52	41.18	42.26	40.39	60.62	98.48	61.17	102.51
Stirling County ...	44.11	45.02	43.91	44.14	61.38	102.74	61.25	107.67
Sutherland ...	44.09	45.00	44.22	44.13	61.39	103.72	61.13	109.11
West Lothian ...	42.98	42.21	42.69	41.11	61.01	98.65	60.80	103.22
Wigtown ...	43.30	42.84	42.77	41.56	61.26	99.76	61.68	106.13
Zetland ...	45.36	48.52	44.57	46.87	62.41	114.52	63.00	112.46
Scotland ...	43.18	43.09	42.84	41.90	60.73	99.65	60.73	104.63

TABLE 5

## AVERAGE HEIGHTS AND WEIGHTS BY SOCIAL CLASS

10 PER CENT. SAMPLE OF  
GLASGOW SCHOOL CHILDREN

Social Class	No. Exd.	Entrants				
		Boys		Girls		
		Height (Ins.)	Weight (Lbs.)	No. Exd.	Height (Ins.)	Weight (Lbs.)
1	26	43.31	44.69	27	43.81	43.26
2	47	43.34	44.94	43	43.28	43.00
3	465	42.54	42.42	422	42.35	41.32
4	113	42.62	41.67	100	42.30	41.03
5	182	42.26	41.84	176	41.55	39.70
Other or not stated	106	42.19	41.69	93	41.59	40.03
Total	939	42.52	42.32	861	42.19	40.96

Social Class	No. Exd.	Leavers				
		Boys		Girls		
		Height (Ins.)	Weight (Lbs.)	No. Exd.	Height (Ins.)	Weight (Lbs.)
1	27	62.07	104.11	25	62.20	104.40
2	52	60.62	99.06	55	60.87	106.75
3	359	60.16	98.22	383	60.24	101.05
4	98	60.45	99.49	84	59.63	97.62
5	110	59.35	95.27	115	59.13	99.08
Other or not stated	86	59.36	95.23	90	59.16	98.42
Total	732	60.08	97.87	752	59.99	100.58

TABLE 5a

## AVERAGE HEIGHTS AND WEIGHTS BY SOCIAL CLASS

## 10 PER CENT SAMPLE

## SCOTLAND

Social Class	Entrants				Leavers			
	Boys		Girls		Boys		Girls	
	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Ins.)	Height (Ins.)	Weight (Lbs.)
1	44.18	45.36	43.71	43.21	61.94	103.21	61.87	108.48
2	43.86	44.55	43.49	43.37	61.50	104.34	61.32	106.07
3	43.19	43.11	42.89	41.95	60.79	99.92	60.84	104.30
4	43.22	43.19	42.79	41.83	60.55	99.06	60.79	105.54
5	42.55	42.09	42.06	40.34	59.83	95.45	59.94	101.49
Other or not stated	42.62	42.36	42.24	40.80	60.26	98.09	60.21	104.85
Total	43.17	43.16	42.82	41.84	60.69	99.59	60.75	104.55

TABLE 6

AVERAGE HEIGHTS AND WEIGHTS BY NUMBER IN FAMILY  
OF GLASGOW SCHOOL CHILDREN

Number in Family	Entrants					
	No. Exd.	Boys		Girls		
		Height (Ins.)	Weight (Lbs.)	No. Exd.	Heights (Ins.)	Weight (Lbs.)
1	553	43·19	43·48	536	42·91	42·57
2	2,276	42·91	42·84	2,049	42·75	42·11
3	2,273	42·58	42·36	2,109	42·39	41·25
4	1,699	42·29	41·80	1,542	42·01	40·68
5	987	42·08	41·44	989	41·82	40·30
6	585	41·90	41·13	557	41·49	39·87
7	345	41·85	41·26	319	41·36	39·59
8	202	41·50	41·02	175	41·24	39·55
9	99	41·64	41·02	103	41·17	39·72
10	63	41·21	40·30	50	41·20	39·00
11	30	41·50	40·80	30	41·47	40·07
12	18	41·44	40·17	18	41·39	39·17
13	6	41·33	40·83	6	42·17	41·50
14	4	42·00	40·25	1	44·00	42·00
15	1	42·00	42·00	1	42·00	42·00
16	—	—	—	—	—	—
17	—	—	—	1	39·00	32·00

Number in Family	Leavers					
	No. Exd.	Boys		Girls		
		Height (Ins.)	Weight (Lbs.)	No. Exd.	Height (Ins.)	Weight (Lbs.)
1	412	60·62	102·90	423	60·84	108·82
2	1,450	60·70	101·09	1,498	60·78	105·96
3	1,616	60·28	98·64	1,568	60·25	102·71
4	1,363	59·65	95·39	1,273	59·84	100·29
5	875	59·61	95·65	947	59·54	99·85
6	653	59·24	93·42	646	59·28	97·71
7	397	59·05	92·98	431	59·23	97·36
8	245	58·44	90·96	264	58·95	96·69
9	150	59·19	92·69	174	58·71	96·48
10	87	58·86	94·44	79	58·78	95·89
11	31	58·42	91·77	36	58·89	95·61
12	23	59·30	95·65	22	59·36	97·82
13	10	59·50	94·40	17	59·06	97·88
14	8	58·50	89·50	5	58·40	94·00
15	1	55·00	79·00	3	61·67	107·33
16	2	61·50	109·50	1	57·00	104·00
17	—	—	—	1	57·00	72·00

TABLE 6a

AVERAGE HEIGHTS AND WEIGHTS BY NUMBER IN FAMILY  
SCOTLAND

Number in Family	Entrants				Leavers			
	Boys		Girls		Boys		Girls	
	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Lbs.)	Height (Ins.)	Weight (Lbs.)
1	43·64	44·04	43·33	43·07	61·77	107·25	61·30	110·28
2	43·55	43·70	43·22	42·63	61·38	103·02	61·36	107·80
3	43·23	43·15	42·93	41·98	60·94	100·20	60·95	105·35
4	42·92	42·63	42·55	41·28	60·57	98·27	60·64	103·57
5	42·66	42·18	42·31	40·86	60·20	96·97	60·26	102·05
6	42·42	41·85	42·01	40·44	59·94	95·38	60·00	100·87
7	42·36	41·74	41·83	40·20	59·56	93·90	59·80	100·03
8	42·11	41·39	41·74	39·82	59·40	93·34	59·67	100·04
9	42·14	41·55	41·61	39·61	59·47	93·37	59·72	99·24
10	41·77	41·13	41·84	40·06	59·32	93·61	59·35	97·28
11	42·00	41·19	41·49	39·85	59·54	95·48	59·33	98·59
12	41·89	41·02	41·93	40·25	59·99	96·73	59·68	99·05
13	42·09	42·11	42·37	41·63	58·79	90·08	59·42	98·19
14	42·45	41·55	41·60	40·00	59·73	95·77	58·41	91·12
15	42·50	43·50	42·25	41·75	59·80	97·80	61·00	109·80
16	46·00	45·00	40·50	34·50	59·25	94·00	57·00	86·75
17	—	—	39·00	32·00	—	—	58·50	74·50
18	—	—	—	—	—	—	—	—
19	—	—	—	—	58·00	88·00	—	—

TABLE 7

AVERAGE HEIGHTS AND WEIGHTS  
OF GLASGOW SCHOOL CHILDREN SINCE 1910

	5 Years				9 years				13 Years			
	Height in ins.		Weight in lbs.		Height in ins.		Weight in lbs.		Height in ins.		Weight in lbs.	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
1910	40.3	39.9	39.2	38.4	45.2	44.7	48.4	47.5	—	—	—	—
1	39.7	40.0	38.8	38.2	46.5	46.7	53.5	51.9	53.7	52.4	68.7	68.4
2	40.0	40.0	38.5	38.4	48.3	47.9	56.4	53.0	—	—	—	—
3	39.7	39.2	38.1	37.4	48.2	48.2	56.8	52.0	54.8	56.2	73.2	81.8
4	40.5	40.4	37.7	37.0	47.4	48.3	54.8	54.1	55.1	56.3	76.4	79.0
1910-14	40.0	39.9	38.5	37.9	47.1	47.2	54.0	51.7	54.5	55.0	72.8	76.4
1915	—	—	—	—	—	—	—	—	—	—	—	—
6	—	—	—	—	—	—	—	—	—	—	—	—
7	41.2	38.5	38.5	38.4	47.9	47.7	55.1	52.9	55.7	56.0	75.9	76.0
8	41.8	39.4	38.4	36.4	48.0	47.5	54.6	52.5	55.7	55.8	73.7	77.6
9	40.3	40.2	38.5	37.6	48.2	47.4	54.2	50.9	56.3	56.3	78.8	78.2
1915-19	41.1	39.4	38.5	37.5	48.0	47.5	54.6	52.1	55.9	56.0	76.1	77.3
1920	40.9	40.7	39.2	38.6	48.2	47.5	53.7	51.6	55.4	56.0	76.0	79.9
1	40.2	39.8	39.5	38.1	49.1	48.3	54.4	53.5	54.7	56.5	74.8	78.5
2	40.5	40.1	38.6	37.7	48.1	47.8	53.1	52.5	55.8	55.9	75.8	77.9
3	40.2	39.6	39.0	38.1	48.2	47.9	54.3	52.9	55.0	54.7	73.7	76.6
4	40.7	40.3	39.1	37.4	49.0	47.9	56.1	53.3	54.5	56.3	74.9	78.2
1920-24	40.5	40.1	39.1	38.0	48.5	47.9	54.3	52.8	55.1	55.9	75.0	78.2
1925	41.3	39.9	38.9	37.4	48.9	48.2	57.8	55.4	55.8	56.3	78.7	80.3
6	40.8	40.3	39.2	37.7	48.8	49.3	56.5	54.8	55.7	56.0	77.4	79.7
7	40.9	40.7	39.3	38.1	49.5	48.8	56.4	54.3	56.1	56.5	78.8	82.1
8	40.6	40.3	39.3	37.8	48.8	48.8	56.6	54.4	56.2	56.2	78.7	80.4
9	40.6	40.4	39.0	37.7	48.8	48.3	56.4	54.0	56.0	56.6	77.6	82.2
1925-29	40.8	40.3	39.1	37.7	49.0	48.7	56.7	54.6	56.0	56.3	78.2	80.9
1930	41.0	40.8	39.4	38.0	49.0	49.0	57.2	55.0	56.4	57.2	80.0	83.1
1	40.9	40.7	39.5	38.1	49.3	49.1	57.2	55.1	56.2	57.1	79.7	83.2
2	41.1	40.7	39.4	37.8	49.3	49.1	57.0	55.0	56.3	57.3	79.8	83.7
3	41.1	40.8	39.5	38.0	49.3	49.1	57.1	55.1	56.2	57.2	79.4	83.0
4	41.2	40.9	39.6	38.2	49.5	49.2	57.6	55.5	56.9	57.8	81.5	85.8
1930-34	41.1	40.8	39.5	38.0	49.3	49.1	57.2	55.1	56.4	57.3	80.1	83.8
1935	41.4	41.1	39.7	38.1	49.6	49.4	57.6	55.7	56.9	57.7	81.7	85.8
6	41.4	41.1	39.9	38.4	49.7	49.4	58.0	55.9	57.2	58.1	82.9	87.6
7	41.4	41.1	40.0	38.5	49.8	49.5	58.2	56.3	57.2	58.1	83.1	88.2
8	41.6	41.3	40.5	39.0	50.2	50.0	59.4	57.6	57.3	58.5	83.4	88.9
9	41.5	41.2	40.3	38.9	50.2	49.9	59.6	57.9	57.4	58.4	84.4	89.5
1935-39	41.5	41.2	40.1	38.6	49.9	49.6	58.6	56.7	57.2	58.2	83.1	88.0
1940	—	—	—	—	—	—	—	—	—	—	—	—
1	42.0	41.6	41.3	39.7	50.3	50.2	59.2	57.8	58.1	58.7	86.5	90.1
2	42.0	41.6	41.1	39.5	50.6	50.2	60.2	58.0	58.2	58.8	86.1	90.5
3	41.9	41.5	41.4	39.7	50.5	50.1	60.1	58.3	58.1	59.0	86.4	91.4
4	41.9	41.5	41.3	39.7	50.5	50.1	60.4	58.3	58.2	58.9	87.2	91.2
1940-44	41.9	41.6	41.3	39.6	50.5	50.2	60.0	58.1	58.1	58.9	86.5	90.8

TABLE 7—Continued

AVERAGE HEIGHTS AND WEIGHTS  
OF GLASGOW SCHOOL CHILDREN SINCE 1910

Year	5 Years				9 Years				13 Years			
	Height in ins.		Weight in lbs.		Height in ins.		Weight in lbs.		Height in ins.		Weight in lbs.	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
1945	42.0	41.6	41.5	40.1	50.7	50.2	60.9	58.6	58.3	59.0	87.1	92.4
6	42.1	41.7	41.7	40.2	50.7	50.2	60.8	58.8	58.2	58.9	87.0	91.5
7	42.1	41.7	41.5	39.8	50.9	50.4	61.1	58.9	58.2	59.0	86.7	91.4
8	42.2	41.7	41.6	39.8	50.9	50.4	61.3	58.9	58.3	59.0	87.2	91.6
9	42.4	42.0	42.0	40.4	51.1	50.5	61.7	59.5	58.6	59.0	88.1	92.2
1945-49	42.1	41.7	41.7	40.1	50.8	50.3	61.2	58.9	58.3	59.0	87.2	91.8
1950	42.5	42.0	42.3	40.5	51.1	50.4	61.8	59.6	58.6	59.2	88.4	93.2
1	42.4	42.0	42.0	40.6	51.1	50.6	61.8	59.7	58.8	59.1	89.4	93.5
2	42.5	42.1	42.0	40.4	51.2	50.6	61.9	59.7	58.9	59.3	89.8	94.1
3	42.5	42.2	42.1	40.5	51.2	50.7	62.1	60.2	59.0	59.4	90.3	94.3
4	42.4	42.0	42.0	40.7	51.4	50.8	63.2	61.1	59.0	59.5	90.9	95.4
1950-54	42.4	42.1	42.1	40.5	51.2	50.7	62.2	60.1	58.8	59.3	89.8	94.1
1955	42.4	42.0	42.3	40.8	51.4	50.9	63.3	61.9	58.0	59.5	91.8	96.0
6	42.5	42.1	42.4	40.9	51.4	51.0	63.4	62.1	59.1	59.7	91.8	97.1
7	42.6	42.2	42.4	41.0	51.6	51.2	63.9	62.6	59.5	59.9	93.5	99.0
8	42.7	42.3	42.5	41.1	51.6	51.2	63.7	62.4	59.7	60.0	95.0	99.4
9	42.7	42.3	42.5	40.9	51.7	51.2	63.7	62.3	59.7	60.1	94.9	100.0
1955-59	42.6	42.2	42.4	41.0	51.5	51.1	63.6	62.3	59.4	59.8	93.4	98.3
1960	42.6	42.3	42.3	41.0	51.6	51.1	63.8	62.5	59.8	60.1	95.2	100.8
1	42.6	42.3	42.6	41.2	51.6	51.3	64.0	63.2	59.8	60.2	96.0	101.5
2	42.7	42.4	42.5	41.4	51.7	51.3	64.2	62.9	60.0	60.3	96.4	101.9
3	42.6	42.3	42.4	41.1	51.7	51.3	64.1	63.0	60.1	60.3	96.7	101.8
4	42.5	42.3	42.2	41.2	—	—	—	—	60.0	60.3	96.3	101.3
1960-64	42.6	42.3	42.4	41.2	51.6	51.2	64.0	62.9	59.9	60.2	96.1	101.5
1965	42.7	42.4	42.5	41.2	—	—	—	—	60.0	60.4	96.4	101.8
6	42.7	42.4	42.5	41.4	—	—	—	—	60.0	60.3	96.4	101.8
7	42.6	42.4	42.4	41.3	—	—	—	—	60.0	60.1	96.9	102.1
8	42.5	42.3	42.3	41.3	—	—	—	—	60.1	60.0	98.2	102.7
9	42.5	42.2	42.2	41.1	—	—	—	—	59.9	60.0	97.2	101.7
1965-69	42.6	42.3	42.4	41.3	—	—	—	—	60.0	60.2	97.0	102.0

HEIGHTS AND WEIGHTS OF 16-YEAR-OLDS

The following table shows the average measurements of Glasgow school children, aged 16 years at the time of medical inspection, arranged in quinquennial periods since 1950.

Quinquennium	Height in ins.		Weight in lbs.	
	Boys	Girls	Boys	Girls
1950-54	67.4	63.6	133.4	122.0
1955-59	67.3	63.6	134.4	122.6
1960-64	67.6	63.1	134.6	123.0
*1965-67	67.7	63.6	163.3	123.7

\*Measurements of 16-year-olds not recorded after the year 1967—the figures, therefore, represent the averages for 3 years only.

TABLE 8

SYSTEMATIC EXAMINATION OF CHILDREN IN SCHOOLS  
SIXTEEN-YEAR-OLDS AND OTHER AGE-GROUPS

The new medical record card only provides for statistical information relating to entrants and thirteen-year-old school children. During the year, however, the results of systematic examination of sixteen-year-olds and children in the age-groups outwith those recommended by the Scottish Home and Health Department were recorded for a selected list of defects. Altogether 3,145 pupils aged 16 years were examined and 1,438 in the other age-groups. The results were as follows :—

16-YEAR-OLD PUPILS

*Numbers and Percentages of Children Suffering from Defects*

Nature of Defects Found	Boys	Girls	Totals
Uncleanliness of Head (nits) ... ..	1	1	2 (0·1%)
Skin Conditions of Head or Body ... ..	157	106	263 (8·4%)
Defective Nutrition ... ..	2	4	6 (0·2%)
Dental Defects ... ..	48	17	65 (2·1%)
Naso-pharyngeal Conditions ... ..	18	24	42 (1·3%)
Eye Diseases (including Strabismus) ... ..	44	57	101 (3·2%)
Defective Vision (for refraction) ... ..	84	62	146 (4·6%)
Ear Disease (including defective hearing)	10	11	21 (0·7%)
Defective Speech ... ..	6	2	8 (0·2%)
Mental and Nervous Conditions ... ..	4	5	9 (0·3%)
Defects of Circulatory System ... ..	12	9	21 (0·7%)
Pulmonary Conditions ... ..	16	6	22 (0·7%)
Deformities ... ..	32	28	60 (1·9%)
Other Diseases or Defects ... ..	74	87	161 (5·1%)

Total number of children examined—1,898 boys and 1,247 girls; total of 3,145

OTHER AGES

	Boys	Girls	Totals
Uncleanliness of Head ... ..	1	—	1 (0·1%)
Skin Conditions ... ..	78	53	131 (9·1%)
Defective Nutrition ... ..	—	1	1 (0·1%)
Dental Defects ... ..	24	8	32 (2·2%)
Naso-pharyngeal Conditions ... ..	9	11	20 (1·3%)
Eye Diseases (including Strabismus) ... ..	21	28	49 (3·4%)
Defective Vision (for refraction) ... ..	42	30	72 (5·0%)
Ear Disease (including defective hearing)	5	5	10 (0·7%)
Defective Speech ... ..	2	—	2 (0·1%)
Mental and Nervous Conditions ... ..	2	2	4 (0·3%)
Defects of Circulatory System ... ..	6	4	10 (0·7%)
Pulmonary Conditions ... ..	8	2	10 (0·7%)
Deformities ... ..	15	14	29 (2·0%)
Other Diseases or Defects ... ..	37	44	81 (5·6%)

Total number of children examined—717 boys and 721 girls; total of 1,438



TABLE 9

## VISUAL ACUITY OF CHILDREN BORN IN 1959

*Results of Eyesight (Snellen) Test*

		Number and Percentage			1968	1967
		Boys	Girls	Totals	Totals	Totals
Children who wore glasses at examination	With Glasses—					
	Good, 6/6	235 (4.8)	261 (5.2)	496 (5.0)	538 (5.1)	568 (5.1)
	Fair, 6/9	154 (3.2)	167 (3.3)	321 (3.2)	308 (2.9)	253 (2.4)
	Bad, 6/18	34 (0.8)	43 (0.8)	77 (0.8)	78 (0.7)	53 (0.5)
	Without glasses—					
	Good, 6/6	91 (1.9)	115 (2.3)	206 (2.1)	241 (2.3)	264 (2.4)
Fair, 5/9	144 (3.0)	151 (3.0)	295 (3.0)	298 (2.9)	283 (2.6)	
Bad, 6/18	188 (3.9)	205 (4.0)	393 (4.0)	385 (3.7)	327 (3.0)	
Children not wearing glasses at examination	Good, 6/6	3,861 (79.4)	3,948 (78.0)	7,809 (78.6)	8,309 (79.6)	8,887 (80.8)
	Fair, 6/9	459 (9.4)	488 (9.6)	947 (9.5)	977 (9.4)	897 (8.2)
	Bad, 6/18	121 (2.5)	156 (3.1)	277 (2.8)	233 (2.2)	336 (3.0)
		<u>4,864</u>	<u>5,063</u>	<u>9,927</u>	<u>10,443</u>	<u>10,994</u>

Summary of findings (taking the better eye and with spectacles if worn at examination):—

	Number and Percentage			1968	1967
	Boys	Girls	Totals	Totals	Totals
Good, 6/6	4,096 (84.2)	4,209 (83.1)	8,305 (83.7)	8,847 (84.7)	9,455 (85.9)
Fair, 6/9	613 (12.6)	655 (12.9)	1,268 (12.8)	1,285 (12.3)	1,150 (10.5)
Bad, 6/18	155 (3.2)	199 (3.5)	354 (3.6)	311 (3.0)	389 (3.5)
	<u>4,864</u>	<u>5,063</u>	<u>9,927</u>	<u>10,443</u>	<u>10,994</u>

Of those with defective eyesight 615 (296 boys and 319 girls) were recommended for refraction or retest.

TABLE 10

## VISUAL ACUITY OF SEVEN-YEAR-OLD CHILDREN

A survey of seven-year-old children was undertaken during the session by the teams operating the Keystone apparatus. 127 schools were visited and 9,758 children (4,529 boys and 5,229 girls) were tested for visual acuity with the following results :—

## RESULT OF TEST BY KEYSTONE APPARATUS

		Number and Percentage		
		Boys	Girls	Totals
Children who wore glasses at examination	With Glasses—			
	Good, 6/6	86 (1·8)	86 (1·6)	172 (1·7)
	Fair, 6/9, 6/12	58 (1·2)	57 (1·1)	115 (1·1)
	Bad, 6/18	47 (1·0)	45 (0·8)	92 (0·9)
	Without Glasses—			
	Good, 6/6	51 (1·1)	52 (1·0)	103 (1·0)
Fair, 6/9, 6/12	61 (1·3)	63 (1·2)	124 (1·2)	
Bad, 6/18	79 (1·6)	73 (1·3)	152 (1·5)	
Children not wearing glasses at examination	Good, 6/6	4,211 (89·2)	5,026 (92·8)	9,237 (91·1)
	Fair, 6/9, 6/12	146 (3·1)	145 (2·6)	291 (2·9)
	Bad, 6/18	172 (3·7)	58 (1·1)	230 (2·3)
		<u>4,720</u>	<u>5,417</u>	<u>10,137</u>

Summary of findings (taking the better eye and with spectacles if worn at examination) :—

	Number and Percentage		
	Boys	Girls	Totals
Good, 6/6	4,297 (91·1)	5,112 (94·4)	9,409 (92·8)
Fair, 6/9, 6/12	204 (4·3)	202 (3·7)	406 (4·0)
Bad, 6/18, etc.	219 (4·6)	103 (1·9)	322 (3·2)
	<u>4,720</u>	<u>5,417</u>	<u>10,137</u>

Of those with defective eyesight, 555 (280 boys and 275 girls) were recommended for refraction or retest.

TABLE 11

## OTHER EXAMINATIONS

(i) IN SCHOOLS—	
Systematic Inspection of Nursery School Children	2,926
Other Examinations in Nursery Schools (including " at risk " cases) ... ..	1,981
1959 age-group (Visual Acuity only)—(by doctor/ health visitor team) ... ..	9,927
Special Cases (in respect of particular defects) ...	26,768
Re-inspections by Medical Officers ... ..	13,576
Leaving interviews ... ..	6,019
Examinations regarding Mental Defect ... ..	2,034
Discharges in Special Schools and Classes ...	31
Audiometric Surveys (by audiometricians) ...	16,368
Keystone Vision Screening by nurses ... .. (Survey of 7-year-olds)	10,137
Total ... ..	<u>89,767</u>
(ii) MAINLY AT CLINICS—	
Applicants for Licences under the Corporation Bye- laws for the Employment of Children ... ..	345
Adult Employees of the Corporation ... ..	1,644
Children as to fitness for School Journeys abroad, Educational Excursions, Camps, etc. ... ..	14,918
Children as to fitness for admission to Residential Schools ... ..	7,343
Pre-vocational Students ... ..	1,157
Examinations in Remand Homes ... ..	3,060
Other Special Cases ... ..	27
Total ... ..	<u>28,494</u>
(iii) CLEANLINESS AND SPECIAL EXAMINATIONS—	
Cleanliness Inspections—(by school nurses) ...	<u>303,713</u>

TABLE 12

## SUMMARY OF INSPECTION AND TREATMENT STATISTICS

*(of which details are given throughout Report)*

## A. INSPECTION

Type	Cases
Systematic Examinations ... ..	36,921
Other Examinations in Schools ... ..	89,767
Other Examinations mainly in Clinics ...	28,494
Cleanliness Examinations ... ..	303,713
Dental Inspections ... ..	51,060
Total ... ..	<u>509,955</u>

TABLE 12—Continued

B. TREATMENT						Cases	Attendances
(a) MINOR AILMENTS—							
<i>Ear—</i>							
Examined only	...	...	...	...	674	} 11,114	
Clinic Treatment	...	...	...	...	1,232		
Aurists' Examinations	...	...	...	...	1,252	1,252	
Aurists' Classifications	...	...	...	...	406	406	
Audiometric Survey	...	...	...	...	1,008	1,008	
Audiometric Ear Cases	...	...	...	...	90	90	
					4,662	13,870	
<i>Eye</i>	...	...	...	...	1,379	6,261	
<i>Skin—</i>							
Cuts, minor injuries, etc.	...	...	...	...	4,501	} 117,233	
Clinic Treatment	...	...	...	...	11,802		
Cleansing Clinics	...	...	...	...	1,623	4,924	
Specialists' Cases	...	...	...	...	44	Included under "clinic treatment"	
Scabies Baths	...	...	...	...	1,958	above 6,618	
					19,928	128,775	
<i>(b) DEFECTIVE VISION—</i>							
Clinic Treatment	...	...	...	...	8,595	8,947	
Spectacles supplied	...	...	...	...	4,404	5,586	
					12,999	14,533	
<i>(c) EAR, NOSE AND THROAT—</i>							
Tonsils, and Adenoids and other							
E.N.T. Operations						640	1,335
					640	1,335	
<i>(d) ORTHOPAEDIC—</i>							
Examined only	...	...	...	...	1,383	1,383	
Treated by Exercises	...	...	...	...	1,304	13,379	
Treated in Spastic Unit	...	...	...	...	44	8,080	
					2,731	22,842	
<i>(e) OTHER DISEASES—</i>							
General	...	...	...	...	7,938	16,015	
Supply of Medicines	...	...	...	...	3,769	10,483	
Artificial Light	...	...	...	...	432	6,463	
Cardiac Cases	...	...	...	...	225	347	
Neurological Cases	...	...	...	...	116	116	
					12,480	33,424	

TABLE 12—Continued

## B. TREATMENT—Continued—

Disease or Defect	Cases	Attendances
(f) DENTAL—		
Ordinary (incl. Emergency Cases)	23,079	76,762
Orthodontic     ...     ...     ...	206	4,573
	<hr/> 23,285	<hr/> 81,335
(g) REMAND HOME     ...     ...     ...	221	221
(h) DEFECTIVE SPEECH     ...     ...	749	5,043
(i) OCCUPATIONAL THERAPY     ...     ...	44	7,105
Totals     ...     ...     ...	<hr/> 79,118	<hr/> 314,744

TABLE 13

## DENTAL INSPECTION AND TREATMENT

## (1) GENERAL STATISTICS :

Age in Years	Number of Children seen at Routine Dental Inspection					Total Number Dentally Fit	Emerg- ency Cases Number Treated
	Number Inspected	With Dental Defects	Offered Treat- ment	Accept- ing Treat- ment	Total Number Treated		
5     ...     ...	6,277	4,969	4,703	1,837	1,583	813	452
6     ...     ...	7,120	5,722	5,490	2,360	2,390	1,296	478
7     ...     ...	7,360	6,035	5,801	2,271	2,410	1,393	481
8     ...     ...	7,496	6,160	5,907	2,206	2,511	1,554	526
9     ...     ...	7,044	5,516	5,193	1,817	2,405	1,531	482
10    ...    ...	7,058	5,340	4,948	1,627	2,306	1,579	499
11    ...    ...	6,587	4,773	4,419	1,436	2,031	1,368	422
12    ...    ...	2,054	1,422	1,331	419	1,258	924	405
13    ...    ...	30	17	17	15	712	609	346
14    ...    ...	27	19	19	20	638	549	299
15    ...    ...	7	7	7	2	229	208	80
16    ...    ...	—	—	—	1	77	65	21
17 and over	—	—	—	—	34	36	4
Totals    ...	<hr/> 51,060	<hr/> 39,980	<hr/> 37,835	<hr/> 14,011	<hr/> 18,584	<hr/> 11,925	<hr/> 4,495

Number of attendances for treatment : 5-17 years, 76,762

(2) DETAILS OF TREATMENT (*School Children*) :

	Routine	Emergency	Total
Fillings—permanent teeth ... ..	35,180	—	35,180
deciduous teeth ... ..	11,473	—	11,473
Extractions (incl. orthodontic)—			
permanent teeth ... ..	4,069	1,054	5,123
deciduous teeth ... ..	15,664	2,301	17,965
Administrations of general anaesthetic ...	1,991	7	1,998
Other operations—permanent teeth ...	21,941	1,491	23,432
deciduous teeth ... ..	4,886	412	5,298
Dentures—partial ... ..	—	—	185
full ... ..	—	—	7
Repairs to dentures ... ..	—	—	28
Radiographs—number of exposures (not incl. orthodontic)—intra-oral ... ..	—	—	575
extra-oral ... ..	—	—	2

## (3) ORTHODONTIC TREATMENT :

Cases continued from previous year, 391 ; new cases, 206 : completed cases, 224 ; discontinued cases, 20 ; cases continuing at end of year, 353 ; attendances for treatment, 4,573.

Diagnostic examinations, 926 ; number of removable appliances fitted, 711 ; repairs to appliances, 83 ; radiographs : intra-oral, 126 ; extra-oral, 32.

## (4) ALLOCATION OF TIME :

<i>Number of half-days occupied in—</i>	Dental Surgeons	Dental Auxiliaries
Routine inspection ... ..	272.42	—
Treatment—school ... ..	8,730.65	1,353.51
orthodontic ... ..	515.50	—
Dental health education ... ..	88	531
	<u>9,606.57</u>	<u>1,884.51</u>

## (5) ADDITIONAL INFORMATION :

Fillings of permanent teeth included 28 crowns, 56 gold inlays, 33 root treatments ; 15 pulpotomies were also carried out.

Statistics do not include Maternity and Child Welfare work.

## APPENDICES

INSPECTION OF SPECIAL CASES  
("NON-ROUTINE" AND "AT RISK")

*Defects found in Children presented for Medical Inspection as "Non Routines"*—26,768 children were presented for "non-routine" inspection (generally on account of defect observed or suspected by teachers) ; 24,598 of these were pupils in ordinary schools and 2,170 in special schools.

Some of these children were found on examination to have more than one defect. The individual results were : nits minor, 1,685 ; nits major and/or vermin, 648 ; skin condition, 3,568 ; eye conditions (including defective vision), 6,055 ; ear, nose and throat defects, 2,521 ; " general " defects, 5,578 ; defective teeth, 2,480 ; no apparent disease, 1,369 ; and other causes, 2,864.

*Re-Inspection of " Cases at Risk "*—The total number of re-inspections was 13,576. Of these, 4,312 were found to be receiving treatment at the school clinics ; 3,604 were being treated elsewhere ; 3,311 did not require treatment ; and 2,349 had not had the necessary treatment provided.

(Details of " non-routine " and " at risk " cases examined in Nursery Schools are given on page 136).

### OTHER SPECIAL INSPECTIONS

The following table includes children seen during the Routine Medical Inspection period at schools :—

#### HOLIDAY CAMPS, EDUCATIONAL EXCURSIONS AND HOLIDAYS AT HOME AND ABROAD (SPRING AND SUMMER, 1969)

	Boys		Girls	
	Final or Only Inspection Number	Per Cent.	Final or Only Inspection Number	Per Cent.
Fit ... ..	6,482	82.9	6,253	88.1
*Fit? ... ..	1,125	14.4	761	10.7
Unfit ... ..	212	2.7	85	1.2
Totals ... ..	<u>7,819</u>		<u>7,099</u>	

\* Doubtful Fitness.

### CLEANLINESS INSPECTION IN SCHOOLS BY NURSES

The results of inspection by Cleanliness Inspectresses are as follows :—

<i>First Inspections—</i>	Boys		Girls	
	Number	Per Cent.	Number	Per Cent.
Examined ...	104,014		100,059	
Infested ...	2,137	(2.1%)	3,971	(4.0%)
Infected ...	8,530	(8.2%)	13,529	(13.5%)
<i>Re-Inspections—</i>				
Examined ...	43,208		56,432	
Infested ...	2,421	(5.6%)	4,637	(8.2%)
Infected ...	8,592	(19.8%)	17,304	(30.7%)

In 520 instances formal notices to cleanse children within 24 hours were issued, mainly by Cleanliness Inspectresses and Senior Woman Assistants.

On re-inspection 197 were found to have been cleansed at home by the parents and 159 to have been compulsorily disinfested at school or clinic.

Under Section 61 of the Education (Scotland) Act, 1962, 17 parents were convicted during the course of the year, the fines imposed being as follows :—

15 of £1, and 2 of £2.

CLEANLINESS SUPERVISION BY SENIOR WOMEN  
ASSISTANTS (ASSISTED BY WELFARE ATTENDANTS)  
AT SELECTED SCHOOLS

The following table gives the percentages of children in the 32 selected schools found to be “ clean and well-cared for in every respect ” at two general inspections during the Session :—

	First Inspection		Second Inspection	
	Boys	Girls	Boys	Girls
Six original schools (January, 1941)	89·7	81·2	87·6	84·3
All thirty-two selected schools ...	83·7	73·2	83·6	73·8

In the *six original schools* the boys and girls at first inspection were improved compared with last year.

For *all selected schools* percentages were reduced for boys and girls at both inspections.

The total numbers seen were :—

At first inspection—15,423 (7,464 boys and 7,959 girls).

At second inspection—15,049 (7,216 boys and 7,833 girls).

NURSERY SCHOOLS AND DAY NURSERIES

At the end of June, 1969, the Education Department was responsible for the administration of 52 Nursery Schools and Classes within the City having places for 3,480 children and of Dunclutha Nursery School, Kirn, where 23 children were accommodated.

On the same date the Health and Welfare Department had under its management 19 Day Nurseries, including two special day centres for handicapped children. The numbers in the various age groups who attend are : 0-1 year, 76 ; 1-2 years, 232 ; 2-5 years, 507 ; 6-12 years (Broomhill Centre) 16—total 831 places.

During the year children in the nursery schools to the number of 2,926 (1,497 boys and 1,429 girls) were subjected to “ routine inspection.” One thousand, seven hundred and thirty-nine were medically examined at the request of teachers and 242 were re-inspected. The results of these examinations are detailed below.



## ROUTINE INSPECTION

*Numbers and Percentages of Children suffering from Defects*

Nature of Defects Found	Boys	Girls	Total
Uncleanliness of Head (nits) ... ..	6	10	16 (0.5)
Skin Conditions of Head or Body ... ..	56	53	109 (3.7)
Defective Nutrition ... ..	12	9	21 (0.7)
Dental Defects ... ..	100	76	176 (6.0)
Naso-pharyngeal Conditions ... ..	136	112	248 (7.5)
Eye Diseases (including strabismus) ... ..	44	32	76 (2.6)
Defective Vision (for refraction) ... ..	12	9	21 (0.7)
Ear Disease (including defective hearing)	21	16	37 (1.3)
Defective Speech ... ..	39	18	57 (1.9)
Mental and Nervous Conditions ... ..	18	23	41 (1.4)
Defects of Circulatory System ... ..	40	26	66 (2.3)
Pulmonary Conditions ... ..	28	9	37 (1.3)
Deformities ... ..	85	52	137 (4.7)
Other Diseases or Defects ... ..	107	92	199 (6.8)

## INSPECTION OF NON-ROUTINE CASES

Children to the number of 1,739 were presented for inspection on account of defects observed or suspected by teachers. The individual results were as follows :—

Head infestation, 13 ; skin conditions, 118 ; eye conditions, 476 ; ear, nose and throat defects, 158, "general" defects, 626 ; defective teeth, 66 ; no apparent disease, 74 ; and other causes, 208.

## RE-INSPECTION OF "AT RISK" CASES

Two hundred and forty-two pupils were re-inspected during the Session.

## PREVENTION OF TUBERCULOSIS

## TEACHERS' SICK PAY REGULATIONS

During the year ended 31st July, 1969, teachers to the number of 2,346 (1,118 males and 1,228 females) were X-rayed.

The numbers recalled for large film (including report from Chest Physicians) were 39 men and 31 women, the diagnoses being as shown :—

	Males	Females
Active Pulmonary Tuberculosis ... ..	—	—
Inactive Pulmonary Tuberculosis (including calcified or fibrotic conditions) ... ..	11	10
Inactive Pulmonary Tuberculosis (pleural thickening)	3	3
Cardiac Hypertrophy ... ..	—	1
Bone defects ... ..	1	2
No Apparent Defect ... ..	24	15
Totals ... ..	39	31

During the same year, 61 nursery assistants and seven occupational centre assistants were X-rayed.

## B.C.G. VACCINATION CAMPAIGN, 1968

Total Schools visited	...	...	104
Total forms issued	...	...	15,975
Parental consents granted			15,501
Total absent	...	...	1,024
Total number tested	...	...	14,477
	Boys	Girls	Total
MANTOUX RESULTS—			
Positive	1,596	1,243	2,839
Negative	5,738	5,900	11,638
VACCINATIONS	5,731	5,892	11,623

## MASS RADIOGRAPHY

Details of children X-rayed by the Mass Radiography Service of Elmbank Street are given in the following tables.

Dr. T. J. R. Miller, Medical Director of the Mass Radiography Service, reports as follows :—

During the year under review, 2,296 mantoux positive pupils were X-rayed for the first time and 2,759 with a positive mantoux reaction the previous year had a repeat X-ray. The abnormalities detected in the primary and re-examination groups are recorded in tables A and B respectively.

One thousand, three hundred and one boys and 995 girls with a moderately positive reaction to the mantoux test were X-rayed for the first time. One boy and one girl, an incidence of 0·87 per thousand of this group, had active pulmonary tuberculosis. One girl was admitted to hospital with pleurisy.

One thousand, three hundred and eighty-one boys and 1,378 girls, mantoux positive the previous year, were re-examined. All were free of active pulmonary tuberculosis.

Three hundred and thirty boys and 312 girls, in all 642 pupils who missed the mantoux test were X-rayed, one girl (1·55 per thousand) with active tuberculosis was admitted to hospital (Table C).

Inactive lesions were found in 2 (0·87 per thousand) of the primary examination group, in 1 (0·36 per thousand) of the re-examination group and in two (3·11 per thousand) of the re-examination group and in 2 (3·11 per thousand) of the pupils who missed the mantoux test.

Previously diagnosed cases of pulmonary tuberculosis were noted in 3 (1·3 per thousand) of the primary and in 1 (0·36 per thousand) of the re-examination groups.

TABLE A

MANTOUX REACTORS X-RAYED FOR THE FIRST TIME  
ABNORMALITIES FOUND AND ACTION TAKEN BY MASS RADIOGRAPHY SERVICE  
YEAR ENDING 31st JULY, 1969

	No action after investigation		Referred to own doctor		Out-patient treatment		Observation		Sent to hospital		Total Number Examined (and rate per thousand)		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Totals
<b>PULMONARY TUBERCULOSIS—</b>													
Active ...	—	—	—	—	1	—	—	—	—	1	1 (0.76)	1 (1.00)	2 (0.87)
Healed Primary ...	9	6	—	1	—	—	1	—	—	—	10 (7.68)	7 (7.03)	17 (7.40)
Inactive ...	—	—	—	—	—	1	—	—	—	—	1 (0.76)	1 (1.00)	2 (0.87)
Known Cases ...	—	—	2	1	—	—	—	—	—	—	2 (1.53)	1 (1.00)	3 (1.30)
<b>OTHER PULMONARY ABNORMALITIES—</b>													
Pulmonary fibrosis ...	—	—	—	—	—	—	1	—	—	—	1 (0.76)	—	1 (0.43)
Pleural Thickening ...	—	—	—	—	—	—	—	—	1	—	—	1 (1.00)	1 (0.43)
Acquired Heart Abnormality ...	—	—	—	—	1	—	—	—	—	—	1 (0.76)	—	1 (0.43)

Numbers examined: 1,301 boys and 995 girls—Total, 2,296.

TABLE B  
 MANTOUX REACTORS X-RAYED A YEAR PREVIOUSLY  
 ABNORMALITIES FOUND AND ACTION TAKEN BY MASS RADIOGRAPHY SERVICE  
 YEAR ENDING 31st JULY, 1969

	No action after investigation		Referred to own doctor		Out-patient treatment		Observation		Sent to hospital		Total Number Examined (and rate per thousand)		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Totals
<b>PULMONARY TUBERCULOSIS—</b>													
Active ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Healed Primary ... ..	11	11	—	—	—	—	1	2	—	—	12 (8.68)	13 (9.43)	25 (9.06)
Inactive ... ..	—	—	—	—	—	—	1	—	—	—	1 (0.72)	—	1 (0.36)
Known Cases ... ..	—	—	1	—	—	—	—	—	—	—	1 (0.72)	—	1 (0.36)
<b>OTHER PULMONARY ABNORMALITIES—</b>													
Acquired Heart Abnormality ... ..	1	—	—	—	—	—	—	—	—	—	1 (0.72)	—	1 (0.36)

Numbers examined: 1,381 boys and 1,378 girls—total 2,759.

TABLE C

PUPILS X-RAYED FOR THE FIRST TIME WHO WERE ABSENT FOR THE MANTOUX TEST  
YEAR ENDING 31st JULY, 1969

	No. action after investigation		Referred to own doctor		Out-patient treatment		Observation		Sent to hospital		Total Number Examined (and rate per thousand)		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Totals
<b>PULMONARY TUBERCULOSIS—</b>													
Active ...	—	—	—	—	—	—	—	—	—	—	—	1 (3·20)	1 (1·55)
Healed Primary ...	1	1	—	—	—	—	—	—	—	—	1 (3·03)	1 (3·20)	2 (3·11)
Inactive ...	—	—	—	—	—	1	—	—	—	—	—	2 (6·41)	2 (3·11)
Known Cases ...	—	—	—	—	—	—	—	—	—	—	—	—	—
<b>OTHER PULMONARY ABNORMALITIES—</b>													
Bronchiectasis ...	—	—	—	—	—	—	—	1	—	—	—	1 (3·03)	1 (1·55)
Pulmonary fibrosis ...	—	1	—	—	—	—	—	—	—	—	—	1 (3·20)	1 (1·55)

Number examined : 330 boys and 312 girls—total, 642.

## RADIOGRAPHY SURVEY OF FURTHER EDUCATION COLLEGES

During November, 1968, the Mass Radiography Service examined students in four colleges of further education. Altogether 3,230 (2,284 males and 946 females) were X-rayed, 38 (29 males and 9 females) of these being recalled for large film.

No active pulmonary tuberculosis cases were detected in the 3,230 examinees. Two male students had apparently inactive pulmonary tuberculosis. Four male and three female students with known tuberculous conditions had satisfactory X-rays.

All those with abnormalities of any significance were informed of the result and a report, together with an indication of the action considered advisable, was sent to their own doctor. Those requiring further assessment were given an opportunity of attending the local chest clinic near their homes.

The following table summarises the results :—

	Male	Female	Total
Number examined ... ..	2,284	946	3,230
Recalled for large film ... ..	29	9	38
<i>Pulmonary Tuberculosis—</i>			
? Inactive ... ..	1	—	1
Inactive ... ..	1	—	1
Known ... ..	4	3	7
	—	—	—
	6	3	9
	—	—	—
<i>Other Abnormalities—</i>			
Bronchial thickening and fibrosis ... ..	1	1	2
Bronchiectasis ... ..	1	—	1
Pleural thickening ... ..	1	—	1
	—	—	—
	3	1	4
	—	—	—

## MEDICAL SUPERVISION OF REMAND HOMES

During the year ended 31st July, 1969, 1,801 boys were admitted to Larchgrove Home and 292 to Beechwood Home. Medical examinations were 2,624 boys and 436 girls and those found to be suffering from various ailments were, on the advice of the visiting School Medical Officer, disposed of as follows :—

208 boys were treated in the Home, 2 at clinic ; 4 were X-rayed and 4 were removed to hospital.

2 girls were treated in the Home and 1 was removed to hospital.

## IMMUNISATION CAMPAIGNS IN SCHOOLS

## (i) DIPHTHERIA AND TETANUS :

Injections given by School Medical Officers :—

First	Second	Re-inforcing	Total Doses
6,288	5,275	21,232	32,795

## (ii) POLIOMYELITIS :

Oral doses administered by School Nurses to children at primary schools :—

First	Second	Third	Re-inforcing	Total Doses
2,287	2,377	1,294	19,029	24,987

## AUDIOMETRIC SURVEYS

A summary of the work done, in connection with Surveys Nos. XX and XXa throughout the year, are as follows :—

## SURVEY No. XX (CHILDREN BORN IN 1962)

	Routine	Non-Routine	Total
Number of schools visited ... ..	—	—	207
Number " sweep " tested in schools ...	14,365	31	14,396
Number failed in " sweep " test ... ..	1,235	24	1,259
Number examined by School Medical Officer	Routine and Non-Routine		493
Number recommended for Threshold test by School Medical Officer ... ..	Routine and Non-Routine		475
Number Threshold tested ... ..	271	2	273
Number awaiting Threshold test (including 12 for tonsil/adenoid operation) ...	Routine and Non-Routine		157
Number awaiting treatment before having Threshold test ... ..	Routine and Non-Routine		23
Number did not attend for Threshold test	Routine and Non-Routine		22
Number attended for retest ... ..	3	—	3
Number awaiting retest ... ..	Routine and Non-Routine		37
Number awaiting result of Threshold test	Routine and Non-Routine		13
Number graded ... ..	Routine and Non-Routine		66
Number awaiting grading ... ..	Routine and Non-Routine		212

The results of the 66 children graded were :—

	Routine	Non-Routine	Total
Referred to Consultant ... ..	9	—	9
Graded—A ... ..	3	—	3
Graded—Normal ... ..	54	—	54
	—	—	—
	66	—	66
	==	==	==

Most of the remainder were at the end of the year awaiting testing, retesting, clinic treatment or grading.

The Consultant Aurist classified 54 cases from the various surveys as follows :—

	Boys	Girls	Total
Normal ... ..	25	14	39
Grade A ... ..	8	4	12
Grade B ... ..	1	2	3

## SURVEY No. XXa (CHILDREN BORN IN 1959)

Number of schools visited ... ..	46
Number of children "sweep" tested in schools ...	1,972
Number failed in "sweep" test ... ..	175
Number examined by School Medical Officer ... ..	32
Number recommended for threshold test by School Medical Officer ... ..	32
Number attended for threshold test ... ..	11
Number awaiting threshold test (including 1 for tonsil/adenoid operation) ... ..	13
Number awaiting clinic treatment before threshold test	4
Number did not attend for threshold test ... ..	4
Number graded ... ..	1
Number awaiting grading ... ..	3

The child graded was referred to Consultant.

Brought forward from Session 1968 were children from previous Surveys, some of whom were dealt with as follows:—

	Routine	Non-Routine	Total
Referred to Consultant ... ..	52	2	54
Graded—A ... ..	3	—	3
Graded—Normal ... ..	137	—	137
	<u>192</u>	<u>2</u>	<u>194</u>

## MEDICAL EXAMINATIONS

	First Examination		Re-Examination		Total
	Boys	Girls	Boys	Girls	
Summonses ... ..	512	515	507	479	2,013
Attendances ... ..	272	253	250	233	1,008
Examinations ... ..	272	253	250	233	1,008

## RECOMMENDATIONS—

Audiogram ... ..	227	206	201	187	821
Clinic treatment and audiogram	37	37	23	22	119
Speech therapy ... ..	1	—	1	—	2
Front seat in class ... ..	23	17	17	27	84
Lip-reading ... ..	—	—	2	6	8
Tonsil/adenoid operation ... ..	9	4	15	11	39
Hearing aids ... ..	—	—	2	4	6
Referred to Consultant ... ..	3	6	7	7	23
Other recommendations ... ..	1	—	—	2	3

## RISK GROUP

Three hundred and eighty-six (197 boys and 189 girls) were summoned for examination and 191 (99 boys and 92 girls) attended. One hundred and sixty-eight children were recommended for audiogram tests, 13 for clinic treatment and audiogram, 14 for tonsil/adenoid operation, 10 for front seat in class and 6 for other forms of treatment.



## TWINS' REGISTER

One hundred and forty-four (71 boys and 73 girls) were summoned and 72 (43 boys and 29 girls) attended. Recommendations included 60 for audiogram, 10 for clinic treatment and audiogram, 4 for tonsil/adenoid operation and 1 for front seat in class.

## SPECIAL DIETS

During the session, 55 children (22 boys and 33 girls) were recommended to have special diets provided in place of the normal school meals.

The conditions were as undernoted :—

		Boys	Girls
Coeliac Disease ...	...	13	20
Diabetes ...	...	5	6
Obesity ...	...	3	7
Gastric Ulcer ...	...	1	—
		—	—
		22	33
		—	—

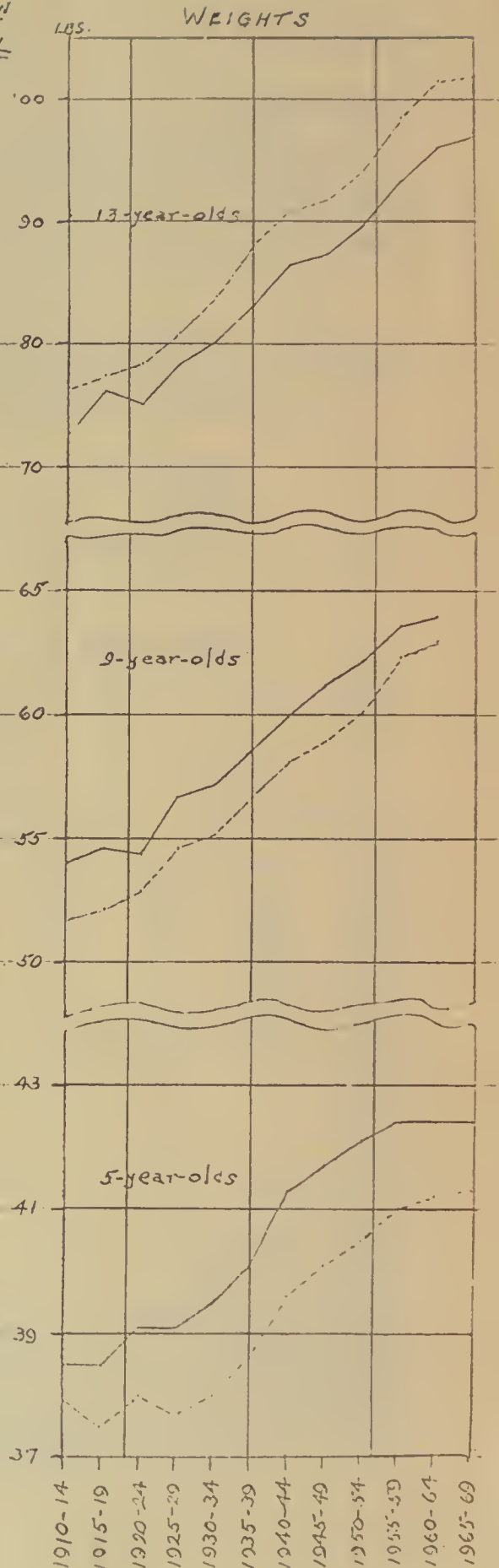
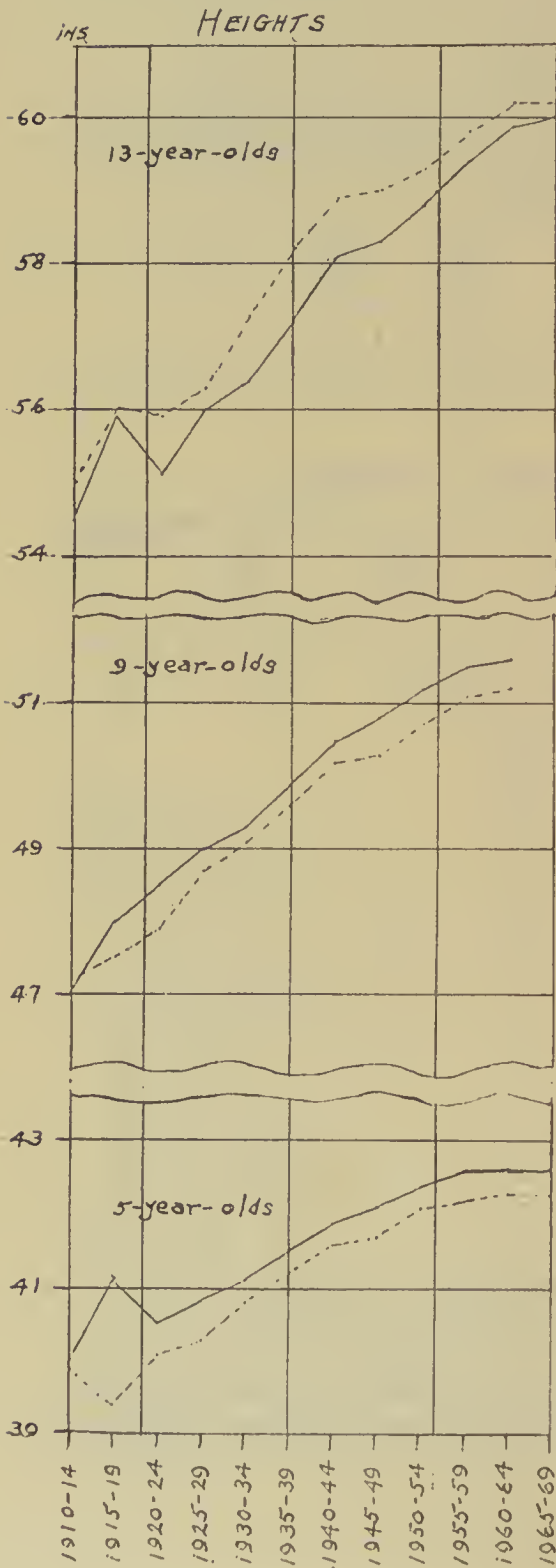
## MORTALITY OF SCHOOL CHILDREN

*Deaths during Year ended 31st July, 1969 of Children aged 5-15 years*

Cause of Death	5-10 Years		10-15 Years		All Ages		Totals
	Boys	Girls	Boys	Girls	Boys	Girls	
Road traffic accidents ...	6	1	6	1	12	2	14
Other violent causes ...	6	2	10	3	16	5	21
Miliary tuberculosis ...	—	1	—	—	—	1	1
Measles ...	—	1	—	—	—	1	1
Infective hepatitis ...	—	—	—	1	—	1	1
Benign neoplasms ...	—	1	1	1	1	2	3
Malignant neoplasms ...	7	—	1	1	8	1	9
Aplastic anaemia ...	—	—	1	—	1	—	1
Thrombocytopenia purpura ...	—	—	1	—	1	—	1
Chronic rheumatic heart disease	1	—	—	—	1	—	1
Pericarditis ...	—	—	—	1	—	1	1
Influenza ...	—	1	—	1	—	2	2
Pneumonia ...	1	1	—	2	1	3	4
Bronchitis ...	—	—	1	—	1	—	1
Ulcerative colitis ...	—	—	—	1	—	1	1
Appendicitis ...	1	1	—	—	1	1	2
Intestinal obstruction ...	1	—	—	—	1	—	1
Nephritis and Nephrosis ...	—	1	1	—	1	1	2
Congenital anomalies ...	2	—	5	2	7	2	9
Subarachnoid haemorrhage ...	—	—	1	—	1	—	1
Cerebellar abscess ...	—	—	—	1	—	1	1
Encephalitis ...	1	—	—	—	1	—	1
Epileptiform seizure ...	—	1	—	—	—	1	1
	26	11	28	15	54	26	80

AVERAGE HEIGHTS AND WEIGHTS OF GLASGOW  
SCHOOL CHILDREN IN TWELVE QUINQUENNIAL  
PERIODS SINCE THE SESSION 1909-10

Boys —  
 Girls - - -







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